



HARMONY CHRISTIAN SCHOOL

Surname:

Name(s):

Admission into Grade:

APPLICATION FOR ENROLMENT

The following must accompany this form:

- 2 x colour ID photographs (name on back)
- **Certified copies of:**
 - The learner's birth certificate
 - Medical Aid card & Clinic card
 - Proof of residence (letter from company if a company house)
 - ID no. of mother & father
 - School reports (All terms)
 - Transfer letter (not grade 1) only on a acceptance
 - If on chronic medication, letter from treating doctor detailing name, dosage and frequency of medication and condition being treated.

| For office use only | |
|---|--|
| 2 x colour ID photographs (name on back) | |
| The learner's birth certificate | |
| Medical Aid card | |
| Proof of residence (letter from company if a company house) | |
| ID no. of mother & father | |
| School Reports (All Terms) | |
| Clinic card | |
| Transfer letter (not grade 1) only on acceptance | |
| Latest Payslip/Salary Advice | |

PLEASE NOTE:

- The completion of this form does not automatically enroll learners at Harmony Christian School.
- The Admission committee will examine each application on its merits and you will be notified.
- All copies must accompany the application
- No form will be processed unless it is complete and correct

1. STUDENT INFORMATION

Surname: Initials: Full Names:

Gender: F M ID Number: Date of Birth: Y M D

Country of origin Home Language:

Previous school: Previous Grade:

Were you a boarder? Y N Reason for leaving:

Name and position of contact person at previous School:

Telephone number:

Does the child currently have any family (siblings) in Harmony? Y N

If so please state the Name and Grade: Name Grade:

2. MEDICAL AND PERSONAL DETAILS

Please specify any medical condition or allergies:

In the event of a medical emergency the school will contact the nearest Provincial Hospital; should you prefer a different medical Practitioner, please supply the Doctor's Name and Telephone Number

Doctor: Telephone number:

Medical Aid Name: Medical Aid No.

Responsible person for Account:

3. PARENTS DETAILS

| DETAILS | FATHER / GUARDIAN | MOTHER / GUARDIAN |
|--------------------------|-------------------|-------------------|
| Surname | | |
| First Name | | |
| ID Number | | |
| Residential Address | | |
| Postal Address | | |
| Occupation | | |
| Company/ Employer | | |
| Telephone (Home): | | |
| (Work): | | |
| (Cell): | | |
| e-mail Address: | | |
| Marital status | | |
| Emergency Numbers | | |
| Doctor | Name: | Tel no.: |
| Relation/Friend | Name: | Tel no: |

4. CONTRACT

I *Full names*; ID No. declare that I am responsible for the payment of all tuition, books and any other fees due for this learner, payable in advance by the 1st of each month. I agree to pay annual fees as approved by the parent body of Harmony Christian School at the annual budget meeting.

I, the undersigned:

- Understand that it is a CRIMINAL OFFENCE to provide false information and hereby certify that ALL the information provided by myself, on this form, is true and correct. False information will result in this application form being disqualified.
- Undertake to ensure that my child abides by the school's Rules and Regulations and the Code of Conduct of Harmony Christian School.
- In terms of Section 39 of South African Schools' Act you are liable to pay these fees. In terms of Section 40 of the South African School's Act we may enforce this payment by taking legal action against you.
- Should you be eligible for an exemption of the above school fees, please contact the School for further particulars.

Parent/Guardian (signature): Date:

5. Policy on Refund

- Once off payments are not refundable e.g. Registration fee, Hostel Maintenance fee, Photocopy fee.
- Fees are payable 1st of each month. All outstanding amounts will be sent to Debt collectors on the 8th of each month for collection.
- Refund for boarding/hostel payment only will be given when parents paid months in advance and withdraws the learner by notifying the school on time.
- No refund will be given for any reason when a learner withdraws during the month.
- In case of referral for rehabilitation, tuition fee must be paid reason being teachers will cover up whatever classroom work the learner missed. If the fees were paid in advance only boarding fee will be refunded provided a letter from the rehabilitation confirms that the learner attended.
- In case of suspension, when the learner is suspended from the school but expelled from the hostel only the hostel portion will be refunded if fees were paid in advance.

6. DECLARATION OF PARENT / GUARDIAN INDEMNITY

- 6.1 I, the undersigned hereby knowingly authorize of Harmony Christian School to grant consent on my behalf for any emergency treatment, where it is necessary and/or expedient and or/ advice by a medical doctor, for an operation on my child. The authority will be operative where I cannot reasonably be contracted.
- 6.2 I hereby knowingly and irrevocably indemnify Harmony Christian School from any costs, medical or otherwise, that may be incurred in the process.
- 6.3 I furthermore grant my full consent for my child to participate in any sport activities, educational visits and extramural activities undertaken by Harmony Christian School. I undertake not to take any action against Harmony Christian School and or/ any of its staff in the case on an accident.
- 6.4 The above undertaking consent shall be valid in all instances except where a parent or guardian withdraws his/her consent in writing.

Parent/Guardian (signature): Date:

Management (School): Date: