


Kronendal Primary School

 FOR	
OFFICIAL USE	
Admin No	
Account No	
Date Received	

Andrews Road, Hout Bay, 7806
 Telephone: (021) 790 2060 Fax: (021) 790 5454
 Email: admissions@kronendal.co.za

APPLICATION FOR ADMISSION

PLEASE NOTE:

- Only fully completed and signed application forms will be considered.
- The application form must be accompanied by the documentation as listed on covering page.
- Once the completed Application Form is received, the School may arrange an interview which could lead to enrolment of the pupil. Completion and submission of the Application for Admission does not constitute acceptance.
- On acceptance, a fee of R2500 is due (to be offset against school fees).

Pupil's Surname:	First Names:
Preferred Name:	Gender: Date of Birth:
ID/Study Permit number:	Cemis number:
Home Language:	Preferred Language:
Country of Birth:	Other Languages spoken:
Number of children in family:	Is pupil 1st, 2nd, etc. child in the family
Are there any siblings at Kronendal?	Yes/No

If yes, state name(s):	And Grade(s)
Citizenship	Religion
Doctor:	Doctor Contact:
Dentist:	Dentist Contact:

PARENT/GUARDIAN WITH WHOM PUPIL LIVES: _____

MARITAL STATUS: Married / Remarried / Divorced / Single / Widowed / Separated (PLEASE TICK)

FATHER	MOTHER
Surname:	Surname:
First name:	First name:
Title and Initials:	Title and Initials:
ID Number:	ID Number:
Occupation:	Occupation:
Name of Employer:	Name of Employer:
Work Phone No:	Work Phone No:
Home Address:	Home Address:
Postal Code:	Postal Code:
Home Phone no:	Home Phone no:
Cell no:	Cell no:
E-mail Address:	E-mail Address:
Additional Contact Person:	Cell No:

School currently attending:	Current Grade:
Date of leaving the above school:	
Grade applying for:	Starting date:
Other school(s) attended by pupil:	

Underline illness(es) pupil has been immunised against:

Tuberculosis (BCG); Diphtheria; Whooping Cough; Tetanus; Measles;
German Measles; Mumps; Poliomyelitis.

N.B: Pupils should have been immunised against ALL the above illnesses before school attendance. Immunisation against Poliomyelitis (BCG) is legally compulsory.

Does your child have any special medical condition that the school needs to be aware of?

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PAYMENT OPTIONS - SCHOOL FEES:

**Information on Fees is available from Bursar's office
[Fees for the following year are announced each November]**

I have read and accept the schools code of conduct. I am aware that Kronendal School is a fee paying school. On acceptance, a fee of R2500 is due to secure your child's place and will be credited to your school fee account. This will be offset against next year's fees.

Please TICK the relevant options. Kindly avoid cash payments, as these may attract additional fees for your account.

- 1. I shall pay a lump sum before the 28 February and qualify for a discount as determined by the Governing Body.
- 2. I shall pay monthly by Debit Order and return the completed Authorisation Form (available from the office)
- 3. I shall pay monthly by EFT or Direct Deposit (always use Family number as beneficiary reference).
- 4. I require financial assistance. Application forms are available from the Bursar's office from the first term.

TERMS & CONDITIONS PERTAINING TO PAYMENT OF SCHOOL FEES

- 1. (a) The school fees with regards to an academic year, are payable in advance unless alternative arrangements have been made with the school for the payment thereof on either a monthly or quarterly basis.

(b) If alternative arrangements are made by the parent(s)/guardian with regards to either a monthly or a quarterly payment plan, the parent(s)/guardian agree and undertake to effect such payment(s) on the due and agreed date, failing which, the full outstanding balance will be due and payable with immediate effect.

(c) On acceptance, liability for the full years fees is incurred . Under exceptional circumstances and on receipt of a written request, a refund may be considered

- 2. (a) The parent(s) / guardian consent to the jurisdiction of the Magistrate Court Act 32 of 1944, as amended.
(b) In the event of legal action being instructed in order to collect arrear school fees, the parent(s)/guardian agree to and accept liability for the payment of the following:
 - (i) Legal costs on the scale as between attorney and client;

- (ii) Interest at the rate of 15.5% per annum as from date of outstanding amount being due and payable until date of final payment; and
- (iii) Collection commission at the rate of 10%.

3. Parent's Liability Section 39

A parent is liable to pay the school fees determined in terms of Section 39 of the School's Act unless or to the extent that he or she has been partially exempted from payment in terms of this Act.

4. In the event of legal action being instituted, I elect as my *domicilium citandi et executandi* as stated in this form.

Signature.....

Date.....

BANKING DETAILS KRONENDAL PRIMARY SCHOOL

First National Bank

Current Account: 534 528 840 35

Branch Code: 204009

Reference: Your Account Number