




SEA POINT PRIMARY SCHOOL

MAIN DRIVE, SEA POINT, 8005, CAPE TOWN

TEL: (021) 434-5355 FAX: (021) 434-6667

e-mail: admin@seapointprimary.com



| | |
|----------------|---|
| VISION | <i>Promoting excellence in education to empower and nurture a dynamic, inspired and resilient learning community that contributes positively to society.</i> |
| MISSION | <p><i>Creating opportunities for learning the values of integrity, care and respect.</i></p> <p><i>To be trustworthy, courageous, creative, innovative and inspirational learners who celebrate and embrace diversity.</i></p> <p><i>To deliver a child-centered, well balanced programme that promotes excellence in education through academic achievement, sport, culture and social responsibilities in an ever-changing world.</i></p> <p><i>To empower and inspire all at Sea Point Primary to reach our full potential, enabling us to be the future leaders.</i></p>  |

**APPLICATION FOR ADMISSION TO AN ORDINARY PUBLIC SCHOOL
ENROLMENT PHASE: 15 February – 15 March 2019**

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

SUBMISSION OF THIS FORM DOES NOT GUARANTEE A PLACE FOR YOUR CHILD

Dear Prospective Parent/Guardian

Please complete this application form in **FULL** and return the hard copy to the school office together with the supporting documents.

No faxed or incomplete forms will be considered and each form must be handed personally to the school secretary together with the R50 application fee (please remember to bring this amount when you submit your form).

Once the completed application form is received, the school may arrange an interview, which could lead to the acceptance and enrolment of the learner.

By completing and signing this form, the parents/guardians undertake to abide and accept, without reservation, the School's Code of Conduct.

Upon acceptance, a fee of R2000.00 must be paid within 2 weeks (14 days) of receipt of the notice confirming a successful placement of the applicant at SPPS. This amount, excluding interest, will be refunded when the learner leaves SPPS, provided the learner's fee payments are up to date. Late responses will only be reconsidered if there is still a vacancy. This fee is non-refundable for learners who do not take up their placement at the school. You will be notified in writing if your child has been accepted or not.

THE APPLICATION FORM MUST BE ACCOMPANIED BY THE FOLLOWING DOCUMENTATION UPON SUBMISSION:

1. A copy of your child's birth certificate
2. Proof of immunisation / Clinic Card
3. Assessment report from previous school / pre-school
4. Transfer form from previous school (if applicable)
5. Proof of residence in the feeder area (Utility account / rental agreement of parent / guardian)
6. Copy of identity document / Passport (Parent / guardian)
7. Proof of employment (Payslip / letter of service of parent / guardian)
8. Valid study / residence permits (Immigrants & refugees)
9. Copy of recent bank statement (Parent / guardian)

Thank you for making application to our school, we trust that our association will be a happy and productive one.

LEARNER CODE OF CONDUCT AND SCHOOL RULES

APPEARANCE OF PUPILS – Children will be given demerits if they are incorrectly dressed and they do not have a letter (letters only last one week)

- ◆ Look neat and tidy in the correct uniform/sports gear. Girls' skirts may not be shorter than 10 cm from the knee.
- ◆ Children must go home in uniform or correct sports gear. (not barefoot and not in swimming costume)
- ◆ All items of clothing must be clearly marked with the child's full name and surname.
- ◆ No visible writing on outside of uniform.
- ◆ Wear full uniform on official school outings/to formal school functions.

Hairstyles for girls: Long hair tied back (plain red, white or black ties only). Hairstyles for boys: Above collar length and above eyebrows.

N.B. No dyed or highlighted hair. No crazy "fashion" hairstyles and no wigs. Hair braids or extensions must be tied up appropriately.

- ◆ No jewellery - only watches and studs/sleepers, in pierced ears, for girls only. Only one earring per ear. No belly-rings or any other piercing will be allowed, eg. additional earrings / tongue rings, etc.
- ◆ No nail varnish or dyed nails.
- ◆ No make-up or coloured lip gloss and lip balm.
- ◆ No tattoos or any other form of body painting.

BEHAVIOUR & RESPECT

- ◆ Show good manners towards all.
- ◆ No bullying, fighting or swearing is allowed.
- ◆ Run and play outside.
- ◆ Be punctual for school and extra-mural activities.
- ◆ A pupil may not leave the school grounds during school hours without the principal's permission.
- ◆ No weapons (e.g. knives) or toys that can cause bodily damage to other pupils may be brought to school.
- ◆ No throwing of stones or other objects.
- ◆ Pupils must cross High Level Road at the two pedestrian crossings only.
- ◆ Pupils should be discouraged from visiting "game machines" at cafes and poolrooms and may certainly not do so in uniform.

MONEY AND VALUABLES

- ◆ Ask before taking/using possessions of others.
- ◆ Valuables are safer at home, e.g. I-pod, PSP, CD Player, cell phone, etc.
- ◆ Any fees/payments brought to school should be the correct amount, in a sealed envelope and with the pupil's name, grade and purpose on the outside. This must be given to the bursar first thing in the morning. Receipts are issued on the same day.
- ◆ Other money should be given to the teacher for safekeeping.
- ◆ No skateboards are allowed.

PARTICIPATION

All pupils are required to participate in at least one summer and one winter sporting activity – a letter is required for exemption.

- ◆ The courtesy of a note is required if a pupil needs to miss an extra-mural commitment.
- ◆ Commitment of at least one summer term and one winter term is required for the programme to run smoothly and successfully.

HOMEWORK/SCHOOL BOOKS

- ◆ Homework books are to be checked and signed daily by parents.
- ◆ All textbooks must be covered in plastic to preserve them.
- ◆ Soft, material-type suitcases must have supporting cardboard liners to protect books.
- ◆ Textbooks and library books remain the property of the school and must be returned before a pupil leaves.
- ◆ Parents will be charged for lost or damaged books.

GENERAL

- ◆ Keep school buildings, toilets and grounds tidy.
- ◆ An absentee note is required if a child misses school.
- ◆ A note is also required if a child needs to leave school early.
- ◆ Any medication to be administered at school should be given to the class teacher or secretary with a written request with instructions.

PUNISHMENTS/DISCIPLINE

THE DISCIPLINE MUST FIT THE OFFENCE, THE INDIVIDUAL CONCERNED AND THE CIRCUMSTANCES, AFTER PROPER AND FAIR INVESTIGATION.

- ◆ Helpful duties around the school: - picking up papers, work in grounds, e.g. weeding, watering, cleaning school vehicles, cleaning classrooms.
- ◆ Lining up at break if behaviour on playground is unacceptable.
- ◆ Detention on Thursday afternoons for 1 hour, which is doubled on Friday if the child doesn't attend.
- ◆ Confiscation of a badge if irresponsibility damages the image of the service group concerned.
- ◆ Confiscation of property for a period of time if applicable.

CELL PHONES

We do not allow children to bring cell phones to school. If parents choose to send a cell phone with their child for safety reasons, these may not be seen or heard or it will be confiscated for the term and will only be returned to the parent not the child. Parents may pay a R100 fine to get the phone back before the time. Any cell phone or other electronic device containing unacceptable material (pornographic or otherwise) will be confiscated and handed over to the Police.

FOR OFFICIAL USE ONLY

| | | | |
|----------------------|--------------------------------------|-------------------------------------|--|
| GRADE | ADMISSION DATE 2020 | LEARNER'S NAME & SURNAME | PLEASE ATTACH RECENT PHOTOGRAPH |
| DATE OF BIRTH | | SUBMISSION DATE | |
| DD | MM | YYYY | |

FINAL ACCEPTANCE:

INTERVIEW DATE:

WAITLIST: OUT OF AREA

WAITLIST: FULL

ADMISSION DATE:

ADMISSION NUMBER:

CEMIS NUMBER:

ACCOUNT NUMBER:

DEPOSIT PAID:

RECEIPT NUMBER:

WITHDRAWAL DATE:

DOCUMENTATION RECEIVED IN SUPPORT OF THIS APPLICATION

| <small>PLEASE PROVIDE CERTIFIED COPIES ALL DOCUMENTATION MUST BE UP TO DATE (VISAS, PASSPORTS, STUDY / WORK PERMITS, ETC.)</small> | YES | NO |
|---|-----|----|
| UNABRIDGED BIRTH CERTIFICATE | | |
| PROOF OF IMMUNISATION / CLINIC CARD | | |
| COPY OF LATEST SCHOOL REPORT | | |
| TRANSFER FORM FROM PREVIOUS SCHOOL | | |
| PROOF OF EMPLOYMENT | | |
| PROOF OF RESIDENCE / RECENT ACCOUNT | | |
| IDENTITY DOCUMENT / PASSPORT OF PARENT / GUARDIAN | | |
| RECENT BANK STATEMENT | | |
| RECORDS REQUESTED FROM PREVIOUS SCHOOL | | |
| DECEMBER REPORT | | |
| AFTERCARE | | |

COMMENTS:

CERTIFICATE OF CONDUCT FROM PREVIOUS SCHOOL

THE FOLLOWING LEARNER HAS APPLIED FOR ADMISSION TO OUR SCHOOL AND WE WOULD APPRECIATE YOUR ASSISTANCE IN COMPLETING THIS FORM.

Name of learner: _____

Learner's CEMIS Tracking number:

| | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|

Name of current school: _____

Period at the above school from _____ to _____ Current Grade: _____

School address: _____

Postal code: _____ Province: _____

E:mail: _____

School telephone: _____ School fax: _____

His/her record at the school may be described as follows: (please put a cross in the appropriate block)

• **Grades previously repeated**

| | | | | | | |
|------|---------|---------|---------|---------|---------|---------|
| NONE | GRADE 1 | GRADE 2 | GRADE 3 | GRADE 4 | GRADE 5 | GRADE 6 |
|------|---------|---------|---------|---------|---------|---------|

• **Academic progress to date**

| | | | |
|-----------|------|-------------------------|--------------------|
| Very good | Good | Adequate / Satisfactory | Requires attention |
|-----------|------|-------------------------|--------------------|

• **Attendance / Punctuality**

| | | | |
|-----------|------|-------------------------|--------------------|
| Very good | Good | Adequate / Satisfactory | Requires attention |
|-----------|------|-------------------------|--------------------|

• **Cleanliness / Presentation**

| | | | |
|-----------|------|-------------------------|--------------------|
| Very good | Good | Adequate / Satisfactory | Requires attention |
|-----------|------|-------------------------|--------------------|

• **Behaviour / Discipline**

| | | | |
|-------------------|------|-------------------------|--------------------|
| Very well behaved | Good | Adequate / Satisfactory | Requires attention |
|-------------------|------|-------------------------|--------------------|

• **Work ethic / Application to tasks**

| | | | |
|---|--|---|---|
| Well motivated. Regularly does more than is required. | Good. Does all that is required and more at times. | Does only what is required. Requires motivation at times. | Requires constant motivation and support. |
|---|--|---|---|

• **Parental involvement and support / homework**

| | | | |
|--|------------------------|---|---|
| Parents are actively involved and very supportive. | Good, regular support. | Fair to adequate support and involvement. | Little evidence of involvement and support. |
|--|------------------------|---|---|

• **Financial information**

| | |
|--|---|
| Fee payments are always made on time. Fees are up to date. | Some fee payments have been skipped. Parents currently owe: |
|--|---|

• **Anticipated placement next year (based on current progress)**

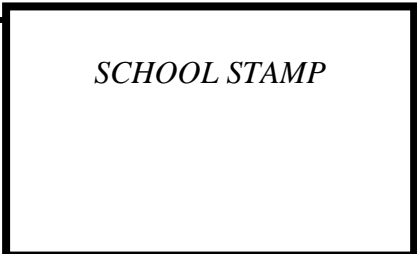
| | | |
|---|--|---|
| The learner will in all probability proceed to the next grade at the end of the year. | The learner will require support to overcome some backlog in order to proceed to the next grade. | It is likely that the learner might have to repeat the current grade next year. |
|---|--|---|

• **Any know problems (eg. Family, emotional, remedial, medical, behavioural, ability to adapt, etc.):)**

NOTE: The above placement information is only intended as an indication for administrative purposes and does not indicate a final decision regarding progression at this stage.

I, _____, as Principal of the above mentioned school, hereby certify that the learner mentioned is currently enrolled as a learner at our school.

SIGNATURE: _____ DATE: _____



A. PARTICULARS OF LEARNER (Mark appropriate block with X)

SURNAME: _____

FULL FIRST NAMES: _____

RESIDENTIAL ADDRESS: _____

POSTAL CODE: _____

SEX: M F HOME LANGUAGE: ENGLISH AFRIKAANS XHOSA OTHER: _____

DATE OF BIRTH:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
| | | | | | | | |

ID NUMBER:

| | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

PASSPORT NUMBER (if foreigner):

| | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Nationality: _____

RELIGION: _____ DENOMINATION (CHURCH): _____

SIBLINGS ATTENDED THIS SCHOOL: _____

NAME OF LAST SCHOOL ATTENDED: _____

REASON FOR LEAVING: _____

HIGHEST GRADE PASSED: _____ YEAR: _____ (Attach proof)

| MEDICAL INFORMATION | YES | NO |
|--|-----|----|
| DOES THE LEARNER SUFFER FROM ANY ALLERGIES / CHRONIC AILMENTS / PHYSICAL DIFFICULTIES? | | |
| IF YES, SPECIFY: | | |
| IS THE LEARNER RECEIVING TREATMENT FOR THE ABOVEMENTIONED CONDITIONS? | | |
| IF YES, SPECIFY: | | |
| HAS THE LEARNER UNDERGONE ANY OPERATION(S)? | | |
| IF YES, SPECIFY: | | |
| IS THE LEARNER ON ANY MEDICATION? (e.g Ritalin, insulin, etc.) | | |
| IF YES, SPECIFY: | | |
| HAS THE LEARNER RECEIVED ANY PSYCHOLOGICAL / OCCUPATIONAL / REMEDIAL THERAPY? | | |
| IF YES, SPECIFY: | | |

FAMILY DOCTOR: _____ PHONE: _____

MEDICAL AID: _____ NUMBER: _____

| | | | | |
|----------------------|----------|--------------------------|----------|--------------------------|
| Learner resides with | PARENT 1 | <input type="checkbox"/> | PARENT 2 | <input type="checkbox"/> |
| Correspondence to | PARENT 1 | <input type="checkbox"/> | PARENT 2 | <input type="checkbox"/> |
| School account to | PARENT 1 | <input type="checkbox"/> | PARENT 2 | <input type="checkbox"/> |

PLEASE MARK WITH ✓

C. DECLARATION TO BE COMPLETED BY PARENT(S) / GUARDIAN(S)

CONSENT TO PARTICIPATE / INDEMNITY / SCHOOL MEDIA PAGES

School outings and other extra-mural activities are undertaken in your child's interest. You will be advised of all outings/extra-mural activities via your child. Should you be unhappy about your child's participation in any of these, a short note to the school is required. I / we hereby give consent for my/our aforementioned child to take part in the outings/extra-mural activities of Sea Point Primary School. I/We hereby request the teacher/excursion leader to act "in loco parentis". I/We fully understand and accept that all outings/extra-mural activities are undertaken at my/our child's own risk. I/We hereby, on behalf of ourselves, our executors, our husband/wife/partner and child, indemnify the Governing Body, Principal, School and Staff against all loss or damage to property from any cause whatsoever or any injury arising to the person of my/our child aforesaid, in the course of any extra-mural activities, educational tours and excursions. All reasonable precautions will be taken to ensure the safety of all learners during said activities.

From time to time, certain learners may be exposed via social media in promoting our school and to inform the public of happenings and events to be used for marketing and fundraising purposes. I/We hereby agree that my/our child's photo's may be shown on media platforms should it be taken.

MEDICAL

Furthermore, in the event of an accident or medical emergency and the school is unable to reach me/us, I/we hereby give consent for my/our child to be taken forthwith to the nearest emergency clinic/hospital for treatment, with the cost thereof being for my/our account.

SCHOOL RULES AND DISCIPLINE POLICY

I/we agree to the school rules and the discipline policy by which my/our child must abide.

DISCLAIMER / LIABILITY

Sea Point Primary does not take any responsibility for any theft or loss of, or damage or destruction to any property of whatever nature bought onto the school premises by my child. Sea Point Primary will not be held liable for payment of any medical bills due to a child being accidentally or willfully injured by another child. The onus will fall on the perpetrator.

CREDIT ENQUIRY

The school may conduct a credit enquiry and/or credit information search about the parent/s with a credit information bureau/person acting as their agents and/or credit grantors for the purposes of making credit risk management related decisions. The school may hold and process by computer or otherwise any information obtained about the parent/s as a result of their liability for school fees.

PAYMENT OF SCHOOL FEES

Sea Point Primary School is classified as a Level 5 Public School and school fees are compulsory. The fees charged to parents are decided upon by the parent-elected Governing Body and are due annually upon admission of a learner to the school. School fees are payable according to the formula that may be chosen by the parent(s)/guardian(s). On signing this section, the parent(s)/guardian(s) are legally bound to pay the prescribed fees. The parent(s)/guardian(s) will be committed to all undertakings and will accept responsibility for monies that are due at any time in accordance with the agreement as set out. For the purposes of this agreement, the parent(s)/guardian(s) domicilium citandi executandi shall be either the work or home address reflected heretofore. The parent(s)/guardian(s) will meet all legal cost on the scale between attorney and own client, including commission of 10% of the amount paid. The parent(s)/guardian(s) will be responsible for interest charged on all overdue accounts at the legal rate.

I/We, the undersigned parent(s)/guardian(s) hereby declare that the information furnished herein is true and correct to the best of my/our knowledge and belief and that we understand the contents thereof. I/We undertake to advise the school in writing of any changes to the details included herein.

SIGN: _____ **Parent 1**

SIGN: _____ **Parent 2**

NAME IN PRINT: _____

NAME IN PRINT: _____

DATE: _____

DATE: _____

BOTH PARENTS TO SIGN THIS SECTION, PLEASE.

D. ACKNOWLEDGEMENT OF DEBT / UNDERTAKING TO PAY SUBSCRIBED COMPULSORY SCHOOL FEES

On signing this section, we are legally bound to pay the prescribed school fees. We commit ourselves to all undertakings and we accept responsibility for monies that are due at any time in accordance with the agreement as set out heretofore.

I/We hereby assume absolute responsibility of any fees as a result of the learner(s) that attend Sea Point Primary School for the full duration.

I/We acknowledge that school fees are payable in advance and that facilities exist for monthly payments.

I/We acknowledge that should any one instalment payable not be paid on due date, then the whole balance outstanding shall immediately become due and payable.

I/We choose the residential address set out below as my/our domicilium citandi et executandi for the service on me/us by the School of all notices, processes and communications.

I/We hereby agree in terms of section 45 of the Magistrate's Courts Act No. 32 of 1944 that the school shall, at its option, be entitled to institute any legal proceedings for the recovery of any monies owing by me/us to the School in respect of such proceedings in terms of Section 28 of that Act.

I/We acknowledge that one month's notice in writing or the equivalent fee is required before the withdrawal of any learner from the School.

I/We confirm that all the particulars that I/we may furnish or that we have been furnished on this form shall, to the best of my/our knowledge and belief, be full, true and accurate.

The fees charged to parents are compulsory and decided upon by the parent elected Governing Body and are due annually and payable according the formula that may be chosen by the parent.

PAYMENT OPTIONS: Annual payments received by **1 February**, will be discounted by 5%.
 Ten monthly payments or four termly payments are to be paid on the **first day of the month** starting on 1 February and ending on 1 November. **ALL FEES MUST BE PAID BY THE 7TH OF EACH MONTH.**

Payment may be made in the following ways: **DEBIT/STOP ORDER** – this is the preferred method (please arrange with your bank and provide proof thereof)
ELECTRONIC FUNDS TRANSFER (EFT) / DEBIT OR CREDIT CARD
CASH TO THE BURSAR – please deposit large amounts of money in the school bank account. (Fax deposit slip to Bursar)

BANKING DETAILS: Nedbank – Sea Point
 Branch code 106909
 Account number 1069376280
 Reference: YOUR CHILD'S FULL NAME AND SURNAME

| PARTICULARS OF OTHER LEARNERS/ SIBLINGS AT THIS SCHOOL WHO ARE FINANCIALLY DEPENDANT ON THE SAME PERSON AS THE LEARNER MENTIONED: | | PLEASE INDICATE HOW YOU WILL BE PAYING | | | |
|---|-------|--|-------------|-------------|--|
| FULL FIRST NAMES AND SURNAME | GRADE | MONTHLY (10 months) | | | |
| | | TERMLY (4 payments) | | | |
| | | ANNUALLY (In full) | | | |
| | | CASH | CREDIT CARD | EFT | |
| | | DEBIT CARD | | DEBIT ORDER | |

| PARENT 1 | | PARENT 2 | |
|--|-----------------------------|--|-----------------------------|
| PRINT NAME OF FATHER/GUARDIAN | I.D. NUMBER/PASSPORT NUMBER | PRINT NAME OF MOTHER/GUARDIAN | I.D. NUMBER/PASSPORT NUMBER |
| | | | |
| SIGNATURE OF FATHER/GUARDIAN IN MY CAPACITY AS CO-PRINCIPAL DEBTOR | DATE | SIGNATURE OF MOTHER/GUARDIAN IN MY CAPACITY AS CO-PRINCIPAL DEBTOR | DATE |
| | | | |

BOTH PARENTS TO SIGN THIS SECTION, PLEASE.

It is hereby agreed that I/we the guardian/parent of the aforementioned learner(s) shall be jointly, the one paying the other to be absolved, liable for the payment of school fees and additional charges as per the terms of the School.
 Obligatory if married in community of property / divorced / separated / non-custodian / guardian.

| If a Company or third person pays the account, please include a supporting letter of confirmation. I/We hereby assume absolute responsibility of any fees as a result of the learner attending Sea Point Primary School for the full duration | |
|--|-----------------------------|
| PRINT NAME OF PERSON RESPONSIBLE FOR THE ACCOUNT (IF OTHER THAN ABOVE) | I.D. NUMBER/PASSPORT NUMBER |
| | |
| SIGNATURE OF PERSON RESPONSIBLE FOR PAYMENT OF ACCOUNT (IF OTHER THAN ABOVE) | DATE |
| | |

WITNESS FOR SEA POINT PRIMARY: _____ PRINT NAME: _____

SEA POINT PRIMARY SCHOOL

FEE STRUCTURE: 1 January 2019 – 31 December 2019 (to be revised for 2020)

ENROLMENT DEPOSIT UPON ADMISSION

| | |
|--|----------------------------------|
| Payable within 2 weeks upon acceptance and receipt of the notice confirming the successful placement of a learner. This amount, excluding interest, will be refunded when the learner leaves SPPS, provided the learner's fee payments are up to date. This fee is non-refundable for learners who do not take up their placement at the school. | ADMISSION DEPOSIT PAYMENT |
| | R2 000 |

LEARNING MATERIAL FEE

| | |
|--|-----------------------|
| No textbooks or learning materials will be issued if this fee has not been paid. Due on the first day of school. | ANNUAL PAYMENT |
| | R1 000 |

TUITION FEES

| | | | | |
|--|----------------------|---|--|--|
| A 5% discount will be offered upon payment of the annual amount only. | | 1 ANNUAL PAYMENT (due by 7 February) | 4 TERMLY PAYMENTS (due by 7th of each month at beginning of each term) | 10 MONTHLY PAYMENTS (February – November) |
| | Gr. R | R18 950 | R4 737.50 | R1 895 |
| | Gr. 1 – Gr. 7 | R18 500 | R4 625 | R1 850 |

AFTERCARE FEES

| | | | | | |
|--|---|--|--|--|-----------------------------------|
| A 5% discount will be offered upon payment of the annual amount only. | 1 ANNUAL PAYMENT (due by 7 February) | 4 TERMLY PAYMENTS (due by 7th of each month at beginning of each term) | 10 MONTHLY PAYMENTS (February – November) | CASUAL CARE (per afternoon) | HOLIDAY CARE (per day) |
| | R9 450 | R2 362.50 | R945 | R80 | R150 |

Aftercare facilities are only available to parents if their fee statement is current.

ADDITIONAL COSTS

| ANNUAL CAMPS | STATIONERY & EQUIPMENT | PRIVATE COACH EXTRA-MURALS | SHOWS /OUTINGS |
|---|--|--|--|
| These fees are due before your child may attend. Applies only to Gr. 4 – 7. | These must be purchased directly from the supplier as per the list supplied. | Please enquire with the coach when needed. | Your class teacher will communicate these costs when they occur. |

INCLUDED IN THE SCHOOL FEES

Extra-murals: Some extra-curricular activities are included in the school fees at no extra charge.

Outings: Some class outings are included in the school fees.

BANKING DETAILS

Account holder: Sea Point Primary School
 Bank: Nedbank
 Account number: 1069376280
 Branch Code: 106909
 Reference: Your child's full name and grade

There will be an additional charge of R150 should you pay with your AMEX card. Parents are encouraged to make arrangements for a debit order through their bank. Proof of payment must be either e-mailed to bursar@seapointprimary.com or faxed to 0214346667
Payment methods: Cash, EFT, credit/debit card, debit/stop order

Sea Point Primary is a Section 21 Fee Paying School and school fees are compulsory. Parents are requested to adhere to this structure and its schedule for payment. If your school fees fall into arrears, the School Governing Body will take further action. The school employs the services of a debt collector to collect outstanding fees and does not hesitate to institute proceedings. Your child will be excluded from attending Aftercare should your fee account fall into arrears. This is not negotiable, and no arrangements will be made if you do not settle fees on time.

AFTERCARE REGISTRATION FORM

DUE TO LIMITED SPACE – WE CAN ONLY ACCEPT CHILDREN ON A FIRST COME, FIRST SERVED BASIS. IF YOU HAVE NOT YET ENROLLED YOUR CHILD BY THE END OF JANUARY, YOUR PLACE WILL BE GIVEN TO THE NEXT CHILD ON THE LIST.

NAME OF CHILD: _____ **Grade:** _____

P A R E N T A L I N F O R M A T I O N

| | FATHER'S DETAILS | MOTHER'S DETAILS |
|-------------|------------------|------------------|
| Title | | |
| First name | | |
| Surname | | |
| Address | | |
| Postal code | | |
| Home phone | | |
| Work phone | | |
| Cell phone | | |

NAME OF PARENT RESPONSIBLE FOR PAYMENT OF FEES: _____

PHONE: _____

I.D. NUMBER: _____ **SIGNATURE:** _____

SIGN: _____ **NAME IN PRINT:** _____
Father/Guardian

SIGN: _____ **NAME IN PRINT:** _____
Mother/Guardian

DATE: _____

PARTICULARS OF OTHER LEARNERS AT SCHOOL WHO ARE DEPENDANT ON THE SAME PERSON AS MENTIONED HERETOFORE:

| FULL FIRST NAMES AND SURNAME | GRADE |
|------------------------------|-------|
| | |
| | |
| | |

PAYMENT OF FEES

THE FEES CHARGED TO PARENTS ARE DECIDED UPON BY THE PARENT-ELECTED GOVERNING BODY AND ARE DUE ANNUALLY UPON ADMISSION OF A LEARNER PAYABLE ACCORDING TO THE FORMULA THAT MAY BE CHOSEN BY THE PARENT.

1. IF FEES ARE PAID ANNUALLY IN ADVANCE UPON ADMISSION AT COMMENCEMENT OF THE SCHOOL YEAR, A DISCOUNT OF 5% MAY BE CLAIMED.
2. FEES ARE CHARGED OVER A TEN-MONTH PERIOD (FEB. – NOV.).
3. THE SCHOOL RESERVES THE RIGHT TO CHARGE INTEREST AT PRIME OVERDRAFT RATE PLUS 2% FOR AMOUNTS PAID AFTER DUE DATE, SHOULD THIS METHOD BE CHOSEN.
4. IF FEES ARE NOT PAID FOR ANY REASON WHATSOEVER, THEN THE SCHOOL HAS THE RIGHT TO REQUEST THE IMMEDIATE REMOVAL OF THE CHILD. SCHOOL FEES MUST BE CURRENT IN ORDER FOR YOUR CHILD TO ATTEND AFTERCARE. IF YOUR FEES ARE NOT PAID UP, ANY PAYMENT MADE TOWARDS AFTERCARE WILL BE DEDUCTED FROM YOUR SCHOOL FEE ACCOUNT FIRST.

LEGAL AND BINDING AGREEMENT: ON SIGNING THIS SECTION, WE ARE LEGALLY BOUND TO PAY THE PRESCRIBED FEES. WE COMMIT OURSELVES TO ALL UNDERTAKINGS AND WE ACCEPT RESPONSIBILITY FOR MONIES THAT ARE DUE AT ANY TIME IN ACCORDANCE WITH THE AGREEMENT AS SET OUT HERETOFORE. FOR THE PURPOSES OF THIS AGREEMENT, OUR DOMICILIUM CITANDI ET EXECUTANDI SHALL BE EITHER THE WORK OR HOME ADDRESS REFLECTED HERETOFORE. WE WILL MEET ALL LEGAL COSTS ON THE SCALE BETWEEN ATTORNEY AND OWN CLIENT INCLUDING COLLECTION COMMISSION OF 10% OF THE AMOUNT PAID. WE WILL BE RESPONSIBLE FOR INTEREST CHARGED ON ALL OVERDUE ACCOUNTS AT THE LEGAL RATE.

AFTERCARE DIRECTIVES

Food Directives:

Please record any instructions regarding food and drink.

Medical Directives:

Please record any major medical problems that could occur at Aftercare, especially asthma, allergies etc.

Right of access to my child/children:

Please record any directives as to who may collect your child from Aftercare. Divorced parents in a stressed relationship must please give clear instructions regarding any deviations from the normal pattern.

1. _____ PHONE: _____

2. _____ PHONE: _____

General Directives:

Please add any other information that may be necessary for the Aftercare staff.

Emergency telephone number:

In an emergency and if we cannot reach either parent on the above number, please indicate an emergency contact person and phone number. In the case of sudden illness or a medical emergency and we are unable to contact the parent/s, such a case will be taken to the nearest hospital, with any treatment being for the parent/s account.

Name: _____ Tel: _____

Home doctor:

Name: _____ Tel: _____

Change of circumstances: Please inform the Aftercare staff immediately of any change in particulars, especially phone numbers.