

CURRO APPLICATION FOR ADMISSION



Curro Holdings Ltd Reg No 1998/025801/06 / VAT Reg No 4670183484

SCHOOL APPLIED AT _____

YEAR APPLIED FOR _____

GROUP OR GRADE APPLIED FOR 1 1.5 2 2.5 3 4 5 (NURSERY SCHOOL)
 ⇒ Confirm availability at applicable school

GRADE R 1 2 3 4 5 6 7 8 9 10 11 12 (SCHOOL)

HOSTEL ACCOMMODATION YES NO
 ⇒ Confirm availability at applicable school

AFTERCARE YES NO
 ⇒ Confirm availability at applicable school

⇒ **MOST IMPORTANT**
This Application for Admission will only be processed if ALL fields are completed legibly, are signed and ALL necessary supporting documents are attached.

Ref 2014/002

NECESSARY SUPPORTING DOCUMENTS, COMPLETED SECTIONS & FORMS

<input type="checkbox"/>	CEMIS Transfer Document once available	<input type="checkbox"/>	Copy of Parents' / Legal Guardians' ID Documents	TWO RECENT COLOUR PHOTOS OF LEARNER (ID SIZE)
<input type="checkbox"/>	Copy of Learner's FINAL Progress Report once available	<input type="checkbox"/>	Completed Hostel Application if applicable	
<input type="checkbox"/>	Copy of Learner's latest Progress Report	<input type="checkbox"/>	Completed Aftercare Application if applicable	
<input type="checkbox"/>	Copy of Learner's Birth Certificate / ID Document	<input type="checkbox"/>	Completed & Signed Debit Order Form	
<input type="checkbox"/>	Copy of Learner's Vaccination Records if available	<input type="checkbox"/>	Subject Choice Form (FET Phase: Gr 10 - Gr 12)	
<input type="checkbox"/>	Copy of Learner's Residence / Study Permit, if foreign	<input type="checkbox"/>	Sections 1 - 14 Completed & Signed	

FOR OFFICE USE

INTERVIEW DATE _____ NOTES _____ _____ _____	APPROVED _____ DATE _____ COMMENCEMENT DATE _____ GROUP / GRADE _____	FAMILY CODE _____ CREDIT REFERENCE _____ SIBLINGS AT THE SCHOOL 1 _____ 2 _____
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SECTION 1 : LEARNER'S PERSONAL DETAILS

SURNAME _____ FULL NAMES AS ON BIRTH CERTIFICATE / ID DOCUMENT _____

PREFERRED NAME _____ IDENTITY NUMBER _____

DATE OF BIRTH AGE _____ GENDER MALE FEMALE

HOME & OTHER SPOKEN LANGUAGE/S HOME _____ OTHER _____

LANGUAGE/S OF LEARNING & TEACHING FIRST _____ SECOND _____

NUMBER OF CHILDREN IN FAMILY _____ POSITION OF CHILD IN FAMILY _____

NATIONALITY _____ COUNTRY OF ORIGIN _____ DATE OF IMMIGRATION _____

RACE

ASIAN	AFRICAN	COLOURED	INDIAN	WHITE	OTHER
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RELIGION _____ RESIDENCE

PARENTS	GUARDIANS	HOSTEL
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TRANSPORT TO/FROM SCHOOL

MOTOR VEHICLE	MOTORBIKE	BUS	TAXI	BICYCLE	WALK
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LEARNER'S CELL PHONE NUMBER _____

SECTION 2 : LEARNER'S EDUCATIONAL DETAILS

CURRENT SCHOOL _____ PREVIOUS SCHOOL _____
 ADDRESS _____ ADDRESS _____
 _____ CODE _____

TEL NO _____ CODE _____ TEL NO _____ CODE _____

PRINCIPAL _____ PRINCIPAL _____

LAST GRADE PASSED _____ YEAR _____ GRADE/S REPEATED _____

HAS ADMISSION TO ANY OTHER SCHOOL/S EVER BEEN REFUSED? IF YES, PLEASE STATE REASON. YES NO

REASON _____

ACADEMIC ACHIEVEMENTS	EXTRACURRICULAR ACHIEVEMENTS	OTHER ACHIEVEMENTS

SECTION 3 : LEARNER'S MEDICAL DETAILS

BLOOD TYPE

O+	O-	A+	A-	AB+	AB-	B+	B-	UNKNOWN
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FAMILY DOCTOR NAME _____ TEL NO _____
 ADDRESS _____ CODE _____

MEDICAL AID NAME _____ MEMBER NUMBER _____
 MAIN MEMBER INITIALS & SURNAME _____ MAIN MEMBER ID NUMBER _____
 OPTION _____

HAS THE LEARNER RECEIVED ALL THE NECESSARY IMMUNISATIONS? IF NO, PLEASE STATE REASON. YES NO

REASON _____

HAS THE LEARNER SUFFERED FROM ANY OF THE FOLLOWING ILLNESSES? PLEASE INDICATE WITH AN X.

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> ASTHMA
<input type="checkbox"/> CHICKEN POX
<input type="checkbox"/> DIABETES
<input type="checkbox"/> DIPHTHERIA | <input type="checkbox"/> ENTERIC FEVER
<input type="checkbox"/> GERMAN MEASLES
<input type="checkbox"/> HEPATITIS
<input type="checkbox"/> MALARIA | <input type="checkbox"/> MEASLES
<input type="checkbox"/> MUMPS
<input type="checkbox"/> POLIO
<input type="checkbox"/> RHEUMATIC FEVER | <input type="checkbox"/> SCARLET FEVER
<input type="checkbox"/> TICKBITE FEVER
<input type="checkbox"/> TYPHOID FEVER
<input type="checkbox"/> WHOOPING COUGH |
|---|---|--|--|

DOES THE LEARNER SUFFER FROM ANY ALLERGIES? YES NO

IF YES, PLEASE GIVE DETAILS. _____

DOES THE LEARNER HAVE ANY SPECIAL MEDICAL NEEDS? YES NO

IF YES, PLEASE GIVE DETAILS. _____

DOES OR HAS THE LEARNER SUFFERED FROM ANY OTHER ILLNESSES OR DISABILITIES? YES NO

IF YES, PLEASE GIVE DETAILS. _____

SECTION 3 : LEARNER'S MEDICAL DETAILS - CONTINUED

IS THE LEARNER RECEIVING MEDICAL TREATMENT FOR ANY CONDITION?

YES

NO

IF YES, PLEASE GIVE DETAILS. _____

IS OR HAS THE LEARNER SUFFERED FROM OR RECEIVED TREATMENT FOR ANY PSYCHOLOGICAL OR EMOTIONAL UPSET?

YES

NO

IF YES, PLEASE GIVE DETAILS. _____

HAS THE LEARNER HAD ANY OPERATIONS?

YES

NO

IF YES, PLEASE GIVE DETAILS. _____

PLEASE SPECIFY ANY OTHER RELEVANT MEDICAL DETAILS. _____

SECTION 3 : LEARNER'S MEDICAL DETAILS - CONSENT

IN A CRITICAL MEDICAL SITUATION, PLEASE BEAR IN MIND THAT THERE MAY NOT BE TIME TO REFER TO THE LEARNER'S RECORDS. THE SCHOOL THEREFORE RESERVES THE RIGHT TO UTILISE THE QUICKEST MEDICAL SERVICE AVAILABLE.

I, _____ BEING THE PARENT / LEGAL GUARDIAN OF _____
HEREBY AGREE THAT A MEDICAL PRACTITIONER MAY PROVIDE EMERGENCY TREATMENT AS MAY BE NECESSARY.

SIGNATURE OF PARENT / LEGAL GUARDIAN _____

SECTION 4 : DETAILS OF FATHER / STEPFATHER / LEGAL GUARDIAN

COMPLETE ONLY IF **NOT** THE ACCOUNT HOLDER. REFER TO SECTION 8.

SURNAME _____

FULL NAMES AS IN ID DOCUMENT _____

DESIGNATION _____

MR MRS MS MISS DR REV PROF OTHER

IDENTITY NUMBER _____

RELATIONSHIP _____

MARITAL STATUS _____

OCCUPATION _____

EMPLOYER _____

RESIDENTIAL ADDRESS _____

WORK ADDRESS _____

POSTAL ADDRESS _____

CODE

CODE

CODE

TEL H _____

TEL W _____

CELL _____

EMAIL ADDRESS (PLEASE WRITE LEGIBLY) _____

PARENTAL STATUS

LEARNER LIVING WITH PARENT/S

LEARNER'S LEGAL GUARDIAN

ACCESS RIGHTS TO LEARNER

ACCESS RIGHTS IN AN EMERGENCY ONLY

SECTION 5 : DETAILS OF MOTHER / STEPMOTHER / LEGAL GUARDIAN

COMPLETE ONLY IF **NOT** THE ACCOUNT HOLDER. REFER TO SECTION 8.

SURNAME	FULL NAMES AS IN ID DOCUMENT												
DESIGNATION	MR	MRS	MS	MISS	DR	REV	PROF	OTHER					
IDENTITY NUMBER													
RELATIONSHIP						MARITAL STATUS							
OCCUPATION						EMPLOYER							
RESIDENTIAL ADDRESS	WORK ADDRESS				POSTAL ADDRESS								
	CODE				CODE				CODE				
TEL H	CODE	TEL W			CODE	CELL							
EMAIL ADDRESS (PLEASE WRITE LEGIBLY)													
PARENTAL STATUS	LEARNER LIVING WITH PARENT/S			LEARNER'S LEGAL GUARDIAN			ACCESS RIGHTS TO LEARNER			ACCESS RIGHTS IN AN EMERGENCY ONLY			

SECTION 6 : DETAILS OF ANOTHER CONTACT IN THE CASE OF AN EMERGENCY

SURNAME	FULL NAMES												
RELATIONSHIP													
TEL H	CODE	TEL W			CODE	CELL							
EMAIL ADDRESS (PLEASE WRITE LEGIBLY)													

SECTION 7 : DECLARATION OF PARENTS / LEGAL GUARDIANS

We, the undersigned, _____, hereby certify that the information given by us in this Application for Admission is complete and accurate. We also agree to the conditions as set out herein.

We accept that the School is based on Christian principles and undertake that this will not be undermined.

We understand that the prescribed number of learners per class may be exceeded through the placing of a current learner that has to repeat a grade.

This Application for Admission will be reconsidered in the case where important relevant information, which should be brought to the School's attention, is withheld.

We have read the Code of Conduct and Dress Code and will accept an offer of placement for our child at the School in accordance with the terms and conditions as set out therein. These documents, as amended from time to time, are available on the official website of the School at www.curro.co.za.

NB: The signatures of both parents and / or legal guardians are required where applicable.

SIGNATURE OF FATHER / STEPFATHER / LEGAL GUARDIAN

DATE

SIGNATURE OF MOTHER / STEPMOTHER / LEGAL GUARDIAN

DATE

SECTION 8 : DETAILS OF ACCOUNT HOLDER

SURNAME	FULL NAMES AS IN ID DOCUMENT																
DESIGNATION	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;">MR</td> <td style="width: 10%; text-align: center;">MRS</td> <td style="width: 10%; text-align: center;">MS</td> <td style="width: 10%; text-align: center;">MISS</td> <td style="width: 10%; text-align: center;">DR</td> <td style="width: 10%; text-align: center;">REV</td> <td style="width: 10%; text-align: center;">PROF</td> <td style="width: 10%; text-align: center;">OTHER</td> <td style="width: 10%;"></td> </tr> </table>			MR	MRS	MS	MISS	DR	REV	PROF	OTHER						
MR	MRS	MS	MISS	DR	REV	PROF	OTHER										
IDENTITY NUMBER	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; height: 20px;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>																
RELATIONSHIP	MARITAL STATUS																
OCCUPATION	EMPLOYER																
RESIDENTIAL ADDRESS	WORK ADDRESS	POSTAL ADDRESS															
CODE	CODE	CODE															
TEL H CODE	TEL W CODE	CELL															
EMAIL ADDRESS (PLEASE WRITE LEGIBLY)																	

PARENTAL STATUS	LEARNER LIVING WITH PARENT/S	LEARNER'S LEGAL GUARDIAN	ACCESS RIGHTS TO LEARNER	ACCESS RIGHTS IN AN EMERGENCY ONLY
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DETAILS OF CHILDREN IN YOUR CARE WHO ARE CURRENTLY AT THIS SCHOOL

1 NAME		GR		2 NAME		GR	
3 NAME		GR		4 NAME		GR	

PAYMENT OPTION	MONTHLY DEBIT ORDER	ANNUALLY IN ADVANCE BY ELECTRONIC FUNDS TRANSFER OR CASH DEPOSIT AT THE BANK
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SECTION 9 : DECLARATION OF ACCOUNT HOLDER

We, the undersigned, _____, hereby certify that the information given by the Account Holder in this Application for Admission is complete and accurate.

We accept joint and several liability to Curro Holdings Ltd for the due and punctual payment of the once-off, non-refundable enrolment fee, school fees, hostel fees and any other amounts which may become due and payable to the School or in respect of participation in or attendance of any extracurricular activity.

We accept the Financial Terms and Conditions of which a copy has been kept.

NB: The signatures of the account holder and that of the 2nd parent / a parent / legal guardian are required if applicable.

SIGNATURE OF ACCOUNT HOLDER

DATE

SIGNATURE OF 2ND PARENT / A PARENT / LEGAL GUARDIAN

DATE

SIGNATURE OF AN AUTHORISED SCHOOL REPRESENTATIVE

DATE

SECTION 10 : FINANCIAL TERMS AND CONDITIONS

1. ACCEPTANCE OF LIABILITY

- 1.1 The person responsible for the Account (hereafter the Account Holder) as set out in the standard Application for Admission (hereafter the Application) herewith assumes liability for the account, alternatively binds him-/herself as co-debtor and surety for payment of all fees to the School.
- 1.2 The legal guardian, as described in the Application, binds him-/herself as surety and co-debtor for the payment of all fees by the Account Holder or any other payments that may arise from this Agreement.

2. TERMS OF PAYMENT

- 2.1 It is recorded that fees are determined at the beginning of the year and that the Account Holder is informed of the result in writing.
- 2.2 The Account Holder shall immediately inform the School if he / she has not received an invoice at the start of the academic year.
- 2.3 Fees for 12 (twelve) months are payable monthly in advance by means of debit order on or before the 2nd (second) day of each calendar month or annually in advance by 31 December, depending on the fee payment option exercised by the Account Holder in the Application.
- 2.4 The School reserves the right to charge interest of 15% (fifteen per cent) on all accounts that are in arrears by 30 (thirty) days or longer.
- 2.5 Payment of monthly fees is not subject to presentation of a statement. Payments are made in accordance with the applicable fee structure of the School.
- 2.6 In the event where an existing account is / has not been managed in the proper manner, no further Applications will be considered.

3. BREACH OF CONTRACT

In the event where the undersigned surety, Account Holder or legal guardian commits a breach of contract of any of the terms of this Agreement, the School may in its sole discretion:

- 3.1 Refuse the learner entry to the School's premises until the breach has been remedied; or
- 3.2 Claim damages from the Account Holder and / or the surety and legal guardian; or
- 3.3 Take whatever legal steps that may be necessary.

4. GENERAL

This Agreement constitutes the whole Agreement between the parties relating to the subject matter hereof. No amendment or consensual cancellation of this Agreement or any provision or term thereof or of any Agreement, bill of exchange or other document issued or executed pursuant to or in terms of the Agreement and no settlement of any disputes arising under this Agreement and no extension of time, waiver or relaxation or suspension of any of the provisions or terms of this Agreement or of any Agreement, bill or exchange or other document issued pursuant to or in terms of this Agreement shall be binding unless recorded in a written document signed by the parties. Any such extension, waiver or relaxation or suspension which is so given or made shall be strictly construed as relating strictly to the matter in respect whereof it was made or given.

5. JURISDICTION

This Agreement is subject to South African law.

6. CREDIT INFORMATION

The Account Holder, surety or legal guardian hereby consents to the disclosure and exchange of personal financial information to a credit bureau or financial institution in accordance with the National Credit Act.

7. DOMICILIUM

The parties choose as their domicilia citandi et executandi the addresses set out in the Application.

8. LEGAL FEES

In the event where the School takes legal action against the Account Holder, he / she will be liable for all legal fees on an attorney client scale, collection costs and commission, interest and tracing fees.

9. CANCELLATION

- 9.1 The Account Holder undertakes to give 30 (thirty) calendar days written notice of termination of the enrolment of a learner, failing which the liability be incurred for the full amount of the following term's fees.
- 9.2 The School shall be entitled to terminate the enrolment of any learner under the following circumstances:

Summarily, and with immediate effect, if the learner is guilty of an offence which, in the sole opinion of the School, renders his / her continued enrolment at the School impossible, in which event the Account Holder, after deduction of all amounts otherwise owing to the School, will be refunded a pro-rata proportion of any fees already paid in advance in respect of such learner.
- 9.3 In the event of emigration, which is a long process, the School requires 1 (one) full term's written notice in advance.

SIGNATURE OF ACCOUNT HOLDER

DATE

SECTION 11 : GENERAL INDEMNITY

1. The School and the Curro Holdings Ltd Board of Directors undertake to implement reasonable and generally acceptable measures with regard to the safety and well-being of all learners, educators and visitors to the School.
2. Due to the nature of the matter, the School and the Curro Holdings Ltd Board of Directors do not accept any responsibility for accidents that may take place in the class, on the school terrain or on the sports fields.
3. Each parent is therefore requested to complete this form as proof that you accept the position of the School and the Curro Holdings Ltd Board of Directors as set out above as well as the risks involved therewith.
4. I, _____, being the parent / legal guardian of _____ who is enrolled as such and accepted by the School, subject to the terms set out herein, indemnify the School and the Curro Holdings Ltd Board of Directors for the time being of the Curro Holdings Ltd (Reg Nr 1998/025801/06) for any losses or damages in general, however they may occur, that I as parent / legal guardian of the above learner may suffer as a result of any occurrence whereby the learner may be involved, whether as the causing or suffering party, whilst participating in any school activity, except if such loss or damage arises as a consequence of the gross negligence or willful misconduct of the School or the Curro Holdings Ltd Board of Directors or any person acting for or controlled by the School or the Curro Holdings Ltd Board of Directors.
5. In particular, I authorise that the aforesaid learner may be involved in all excursions undertaken by his / her group or class during school days as part of his / her learning experience and, where applicable, I agree that he / she may utilise the transport arranged by the School for such excursions. I also indemnify the School and the Curro Holdings Ltd Board of Directors for any damages or losses that I as parent / legal guardian of the above learner may suffer under such circumstances and voluntarily accepts the risks associated therewith, except if such loss or damage arises as a consequence of the gross negligence or willful misconduct of the School or the Curro Holdings Ltd Board of Directors or any person acting for or controlled by the School or the Curro Holdings Ltd Board of Directors.
6. In the event of the aforesaid learner making use of the bus service to and from the School, I acknowledge that I am aware that such service is operated by an independent contractor and that neither the School nor the Curro Holdings Ltd Board of Directors accepts any responsibility therefore. The Curro Holdings Ltd Board of Directors have, however, in awarding the right to operate the service, laid down certain conditions to ensure that the bus company complies with safety regulations and that the driver is sober and experienced with a proven and unblemished record.

SIGNED AT _____ ON THIS _____ DAY OF _____ 20 _____.

AS WITNESSES:

1. _____
2. _____

SIGNATURE OF PARENT / LEGAL GUARDIAN

SECTION 12 : PERMISSION TO USE PHOTOGRAPHS

I understand and acknowledge that, from time to time, photographs are taken of the School's learners, and that, insofar as these photographs are placed in the possession or control of the School and / or Curro Holdings Ltd, these photographs might be used by the School and / or Curro Holdings Ltd in the electronic and / or printed media, including, but not limited to, the Curro Holdings Ltd website, social media, newspaper advertisements and articles, magazine advertisements and articles, brochures, flyers, posters, billboards, banners, flippers and signage on buildings and vehicles. The School and / or Curro Holdings Ltd will at all times, insofar as the use and publication of photographs are placed in the control of the School and / or Curro Holdings Ltd, ensure that these photographs portray excellence and are used in good taste.

SIGNATURE OF PARENT / LEGAL GUARDIAN

SECTION 13 : SURVEY - SERVICES / FACILITIES REQUIRED

SCHOOL TRANSPORT	<input type="checkbox"/> YES	<input type="checkbox"/> NO	FROM WHERE? _____
HOLIDAY CARE	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
MUSIC TUITION	<input type="checkbox"/> YES	<input type="checkbox"/> NO	INSTRUMENT/S _____

SECTION 14 : SURVEY - MARKETING

WHERE DID YOU HEAR ABOUT US? PLEASE INDICATE WITH AN X.

<input type="checkbox"/> BILLBOARD	<input type="checkbox"/> NEWSPAPER	<input type="checkbox"/> MAGAZINE	<input type="checkbox"/> RADIO
<input type="checkbox"/> PRESENTATION	<input type="checkbox"/> BROCHURE	<input type="checkbox"/> FLYER	<input type="checkbox"/> EXHIBITION
<input type="checkbox"/> FRIEND	<input type="checkbox"/> WEB	<input type="checkbox"/> OTHER / SPECIFY _____	

PLEASE INDICATE HOW SATISFIED YOU WERE WITH THE SERVICE RECEIVED PRE-ENROLMENT.

<input type="checkbox"/> VERY SATISFIED	<input type="checkbox"/> SATISFIED	<input type="checkbox"/> UNSATISFIED	<input type="checkbox"/> VERY UNSATISFIED
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WAS THE INFORMATION RECEIVED PRE-ENROLMENT:

<input type="checkbox"/> RELEVANT	<input type="checkbox"/> INFORMATIVE	<input type="checkbox"/> SUFFICIENT
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IF NOT, PLEASE PROVIDE FURTHER DETAILS. _____