

Little Porcupine and Friends



Aftercare Centre

27 Benjamin Street,

Brackenhurst, 1449

P.O. Box 990044

Kibler Park, 2053

Telephone: (011) 868-1404

Cell: 060 991 0962

Email address: littleporcupine@telkomsa.net

Website: www.littleorcupineandfriends.co.za

AFTERCARE ENROLEMENT FORM 2021

Please ensure that your full physical address, postal address, contact numbers are stated correctly on your application form.

Date of Application: _____

Date Starting: _____

(For office use only)

Aftercare

School which scholar attends: _____

Grade: _____

Previous Aftercare attended: _____

LITTLE PORCUPINE AND FRIENDS

AFTERCARE FEES 2021

CLASS	MONTHLY	2021 ANNUAL RATE @ 5% DISCOUNT
Kenton Primary Glenview Primary Brackenhurst Primary Laerskool Orion Revival City College	R1700.00	R19 380.00
Waterstone Collage	R2300.00	R26 220.00
Covenant Collage Grace Trinity St. Declan's Lady of Labanon	R2250.00	R25 650.00
Daily Rate	R150.00	

ANNUAL DISCOUNTED RATE ONLY VALID TILL END OF JANUARY 2021

Registration Fee on Enrolment:	R550.00
--------------------------------	---------

Sibling discount:	R200.00
-------------------	---------

Please note:

We do offer a holiday program, your child will be entertained during the school holidays we have baking days, art days, movie day. We also have different outing for the different age groups and lots more. All these events will be an optional extra charge payable on the day.

We charge an additional R25.00 a day your child attends aftercare during the school holiday. This is for the extra meals your child gets (breakfast, bread and tea, lunch, bread and juice/biscuit and a fruit), this money also covers the art or baking activity they do for the day.

A RE-ENROLEMENT FEE WILL BE CHARGED EVERY YEAR

TINA COWLEY – READING CENTRE (25 Benjamin Street)

They offer extra

- Reading
- English
- Afrikaans
- Maths

Contact GINA on 083 381 1113 or tcbrackenhurt@gmail.com

LITTLE PORCUPINE AND FRIENDS

A NON-REFUNDABLE DEPOSIT MUST BE PAID ON THE FIRST DAY OF ENROLEMENT IN ORDER TO SECURE YOUR APPLICATION.

- PLEASE NOTE THE NEW CREDIT ACT CLAUSE IS ENCLOSED
- PLEASE READ CAREFULLY
- PLEASE INITIAL EVERY PAGE

BANKING DETAILS:

Account Name:	Little Porcupine And Friends
Bank	Standard Bank
Account Number	041 141 245
Branch	The Glen
Branch Code	006 005
Reference	PLEASE USE CHILDS NAME AND SURNAME

Please fax 011 868-1328 or email: littleporcupine@telkomsa.net proof of payment.

LITTLE PORCUPINE AND FRIENDS

PERSONAL DETAILS:

CHILD'S NAME AND SURNAME: _____

NICK NAME: _____ BOY / GIRL: _____

DATE OF BIRTH: _____ AGE: _____

Who does child live with: Biological parents / mother / father / adoptive parent /
grandparents / foster parents / family member

HOME LANGUAGE: _____ OTHER LANGAUGE: _____

LANGUAGE AT SCHOOL: _____

RACE (For Government): _____ RELIGION: _____

NATIONALITY: South African / Other (please specify) _____

ARE THERE OTHER SIBLINGS IN OUR SCHOOL?

NAME AND SURNAME: _____

NAME AND SURNAME: _____

NAME AND SURNAME: _____

PARENTS / GUARDIAN INFORMATION:

NAME OF MOTHER / GUARDIAN:

NAME OF FATHER / GUARDIAN:

ID NUMBER: _____

ID NUMBER: _____

RELIGION: _____

RELIGION: _____

RESIDENTIAL ADDRESS:

RESIDENTIAL ADDRESS:

POSTAL ADDRESS:

POSTAL ADDRESS:

CELL PHONE NUMBER: _____

CELL PHONE NUMBER: _____

HOME NUMBER: _____

HOME NUMBER: _____

OFFICE NUMBER: _____

OFFICE NUMBER: _____

EMAIL ADDRESS: _____

EMAIL ADDRESS: _____

LITTLE PORCUPINE AND FRIENDS

PARENTS EMPLOYMENT DETAILS:

EMPLOYER: _____

EMPLOYER: _____

OCCUPATION: _____

OCCUPATION: _____

EMPLOYER ADDRESS: _____

EMPLOYER ADDRESS: _____

OFFICE NUMBER: _____

OFFICE NUMBER: _____

PERSON RESPONSIBLE FOR PAYMENT OF SCHOOL FEES:

NAME: _____

TELEPHONE NUMBER: _____

RELATIONSHIP TO CHILD: _____

SIGNATURE: _____

EMERGENCY DETAILS:

Person to contact in case of emergency other than PARENT: _____

HOUSE NUMBER: _____

CELL PHONE NUMBER: _____

OFFICE NUMBER: _____

Relationship to the child: _____

MEDICAL INFORMATION

NAME OF FAMILY DOCTOR: _____

MEDICAL AID SCHEME: _____

MEDICAL AID NUMBER: _____

Does child have any allergies: YES / NO

If YES, please specify:

OTHER:

Please add any extra information you feel is necessary, that has not been covered by the questions you have already answered:

LITTLE PORCUPINE AND FRIENDS

TERMS AND CONDITIONS OF THIS AGREEMENT

1. Little Porcupine and Friends hours are as follow:
MONDAY – FRIDAY 06:30-18:00
For every 15 minutes after 18:00 or part thereof a R100.00 late fine will be charged.
2. Fees are payable strictly in advance on or before the 3rd day of every month. Your child will be suspended until the account is paid. School fees are still payable during suspension period.
3. One month's written notice on the 1st day of the month is required for termination of enrolment. If this is not adhered to, the full fee will be charged. Notice will not be accepted over the phone or for the October – December period.
All overdue accounts will receive a letter of suspension and the child must not return until the account is up to date. Full school fees will be payable during the suspension period. If the account is not settled – your account will be handed over for collection. Legal fees will be for your account.

I parent/guardian of _____ have read and understand point 3 and fully agree with this condition of termination.

Signature: Mother

Signature: Father

Signature: Guardian

Signed on this ____ day of ____ 20__.

4. School fees must be paid in full for the month if absent, sick or on holiday.
5. All children's clothing must be marked clearly.
6. Children with contagious illnesses or who are sick, are not permitted to attend school. KINDLY INFORM US WHEN YOUR CHILD IS ILL AND WILL NOT BE ATTENDING SCHOOL.
7. If your child plays sport or is absent and you fail to inform us and we have to phone you a R50.00 penalty will be charged for each call.
8. The aftercare will be closed over the festive season. Parents will be liable to pay fees in advance for the month of December.
9. Although we take the necessary precautions to ensure the safe keeping and good health of your child, the staff, teachers and owners of Little Porcupine and Friends are not liable for any accidents, medical conditions, death or any other serious conditions that might avail upon your child whilst being in our care.

INITIALS OF DAD _____ AND MOM _____

10. General

- No child will be permitted to leave the school premises with anyone other than his/her parents or unless otherwise arranged
- Remember, we are here to make your child’s stay a long and happy one. If you have any problems, please let us know.
- Should learners bring any toys/personal belongings to Aftercare, whether it is during school time or school holidays, the aftercare and the staff will take no responsibility for the loss or damage to any such belongings. Should any learner bring any toys/personal belongings to aftercare it will be entirely at own risk.
- We trust you have read these rules carefully and we welcome you to Little Porcupine and Friends Aftercare.

11. Religious Policy

- Little Porcupine and Friends is a Private Christian Nursery School. We follow a Christian curriculum with Bible stories and Praise and Worship songs that are sung by our children, and acknowledge Jesus to be our Lord and Saviour.
- The curriculum is compulsory and no child / children may abstain from it.
- We welcome other religious groups and will accommodate such religious groups, in the line of food only, e.g. Muslim – no pork.

12. Smoking Policy

- Smoking is not permitted on the school premises; smoker should smoke away from school grounds at all times.

13. School Website

- We have a website of the nursery school, feel free to view the site on www.littleporcupineandfriends.co.za. Included on the website is an option to view photos of the school and children. Please specify if you would or would not want your child’s picture on the website.

	I don’t mind my child’s photo being on the website
	I DO NOT want my child’s photo on the website

I understand and have carefully noted the Terms and Conditions of the Agreement and accept them as such.

I hereby give my full consent that my child / children _____ may be given in a medical emergency and if necessary transported to doctor or hospital when either parents cannot be reached.

Signature: Mother

Signature: Father

Signature: Guardian

Signed at _____ on this ____ day of _____ 20__.

This is a legal document and you have agreed to the Terms and Conditions of LITTLE PORCUPINE AND FRIENDS.

LITTLE PORCUPINE AND FRIENDS

NATIONAL CREDIT ACT

NEW NATIONAL CREDIT ACT CLAUSE

I / We the undersigned hereby agree and permit that LITTLE PORCUPINE AND FRIENDS is entitled to:

1. Make any reasonable enquiries to any party to verify and research any details provided by the applicant on this application form or any other details is in relation thereto.
2. Access the files of any credit bureau or its agent or its clients to ascertain the Applicant's and its Directors and/or Members and/or Principal's total available credit profiles when assessing this application and at any time during the currency of the Applicant's account with the supplier.
3. Disclose the existence and the conduct of the Applicant's account with the Supplier, whether still current or not, to any Credit Bureau or other credit granter for publication.

INTEREST CLAUSE

- The Applicant hereby acknowledge that should any amount not to be paid on due date, the full amount owing by the applicant to the creditor shall immediately become due and payable without any notice whatsoever nature notwithstanding that any amount may, as at that date, not yet be due. The Applicant shall pay interest on all overdue amounts at a compound rate of 10%.
- The Applicant further agrees that in the event of its default in any respect whatsoever towards the creditor, the creditor shall be entitled to place the application on "stop supply" without any notice notwithstanding that the applicant may have placed an order for the supply of service prior to the stop supply date.

COST CLAUSE

In the event of the creditor instructing its attorneys or collectors agents to collect any amounts, all legal fees and collection charges and tracing agents fees as between attorney and client, shall be borne by the applicant and all payments made shall firstly be allocated towards such fees and charges thereafter to interest and finally to capital.

MAGISTRATE'S JURISDICTION CLAUSE

The Applicant and the surety/ies hereby consent to the jurisdiction of the magistrate court for all actions which may be instituted against one or all for the recovery of any amounts owing to the creditor.

The Applicant chooses the street address which is furnished on the application form for Credit Facilities as domicillium citandiet executani for all purposes in respect of the Credit Facilities. Any charges of the said domicillium can only be effected by the Applicant notifying LITTLE PORCUPINE AND FRIENDS in writing of another complete address.

I/We hereby declare and acknowledge that I/We are duty authorised to sign any/all documents on behalf of my/our company. I/We hereby further declare that we have read and understand that Standard Terms and Conditions of LITTLE PORCUPINE AND FRIENDS and by signing below, I/We are standard Terms and Conditions.

SIGNATURE AMENDMENT

Name and Surname: _____

ID Number: _____

Signature: _____

LITTLE PORCUPINE AND FRIENDS

CHECK LIST:

Aftercare

- Mom's ID
- Dad's ID
- Guardian's ID
- Medical Aid Card