



LAERSKOOL DANIE MALAN AFTERCARE APPLICATION FORM

Family code	
Date of acceptance	
1 st Payment	

1 ST CHILD'S INFORMATION											
Full name and surname:											
Nickname:		Date of birth:		J	J	J	J	M	N	D	D
Age:	Total children in family:		Position:								
2 ND CHILD'S INFORMATION											
Full name and surname:											
Nickname:		Date of birth:		J	J	J	J	M	M	D	D
Age:	Total children in family:		Position:								
3 RD CHILD'S INFORMATION											
Full name and surname:											
Nickname:		Date of birth:		J	J	J	J	M	M	D	D
Age:	Total children in family:		Position:								
4 TH CHILD'S INFORMATION											
Full name and surname:											
Nickname:		Date of birth:		J	J	J	J	M	M	D	D
Age:	Total children in family:		Position:								
PARENT(S) INFORMATION											
Marriage status (mark with x)				Married	Divorced	Single	Widower	Widow			
If divorced who has custody over the children: (mark met x)								Father	Mother		
FATHER						MOTHER					
Name:						Name:					
Surname:						Surname:					
Id no:						Id no:					
Address:						Address:					
Employer:						Employer:					
Occupation:						Occupation:					
Work address:						Work address:					
E-mail:						E-mail:					
Postal address:						Code:					
Tel number:		Father:	Cell:			Mother:	Cell:				
			W:				W:				
			H:				H:				
MEDICAL INFORMATION											
Name of House Doctor:											
Name of Practice where Doctor practices:											
Address of practice where Doctor practices:											
Tel no:		(1)		(2)							
Medical Aid name:											
Member no:		Child's dependant code:									
Main member name:											
MEDICAL BACKGROUND											
Does your child(ren) have any life threatening conditions:											

Does your child(ren) have any Allergies, disabilities or special diet conditions:								
Is there any other medical information that the aftercare should be aware of:								
PERSON RESPONSIBLE FOR PAYMENT OF THE ACCOUNT (mark with x)								
Father:		Name & Surname			ID no			
Mother:		Name & Surname			ID no			
Other person:		Name & Surname			ID no			
Relationship with child:								
Physical address:								
Tel:	Cell:	Work:		Home				
Employer:								
Physical address:								
Signature of person responsible for payment of account:								
SMS – MESSAGES (mark with X)								
Finances:	Father		Tel no:		Mother		Tel no:	
General:	Father		Tel no:		Mother		Tel no:	
RELATIVES INFORMATION (person who can be contacted if parents can't be reached)								
Full names:					Surname:			
Relationship with parents:				Does your child(ren) know this person:		YES	NO	
INFORMATION OF AUTHORISED PEOPLE WHO MAY FETCH YOUR CHILD AT AFTERCARE								
Name and surname:					Relationship:			
Name and surname:					Relationship:			
Name and surname:					Relationship:			

UNDERTAKING OF PARENT OR GUARDIAN WHO ENROLLED A CHILD AT THE AFTERCARE CENTRE

I, the undersigned, _____ declare that I completed this form fully, and that the information provided herein, is true and correct. I accept the terms of the aftercare and accept acknowledge the following:

1. CARING OF THE AFTERCARE CENTRE PERSONNEL:

- 1.1 The personnel of the aftercare center will take all the necessary precautions to prevent injuries, but if a child gets injured on the premises of the Aftercare center, the personnel will not be held responsible for the injuries of the child;
- 1.2 The aftercare staff will give my child medication in case of an emergency, or in the case of my child having headache, or an injury, or a fever, insect bites or any condition that needs medical attention;
- 1.3 I declare that my child has no allergies / only has the allergies as stated above;
- 1.4 Light injuries will be attended to by the aftercare staff;
- 1.5 The aftercare staff will contact me immediately in the case of any critical injury. I will have to collect my child immediately;
- 1.6 If I cannot be reached by the aftercare, my child will be taken to the nearest medical institution;
- 1.7 I will be responsible for the payment of this account;
- 1.8 I will not be able to hold the aftercare of the aftercare staff responsible for the account incurred by the injury obtained by my child(ren) while attending the aftercare;

2. PAYMENT OF AFTERCARE FEES:

- 2.1 Aftercare fees will be revised on a yearly basis together with the planning and budget for the new academic year;
- 2.2 A registration fee of **R200.00 (TWO HUNDRED RAND)** is payable on or before the **7th (SEVENTH) of January 2018**;
- 2.3 Thereafter the aftercare fees of **R9,590.00 (NINE THOUSAND FIVE HUNDRED AND NINETEEN RAND) (1 x R890.00) and (10 x R870.00)** for the year will be payable once off on or before the **11th of January 2017 OR** in installments of **R890.00 (EIGHT HUNDRED AND NINETY RAND)** on or before the **11th of January 2018** and **R870.00 (EIGHT HUNDRED AND SEVENTY RAND)** per month payable in **10(TEN)** instalments on or before the **7th** of each month;
- 2.4 The **1st (FIRST)** installment of **R890.00 (EIGHT HUNDRED AND NINETY RAND)** will be payable on or before the **11th (ELEVENTH) of January 2018** and thereafter in installments of **R870.00 (EIGHT HUNDRED AND SEVENTY RAND)** on or before the **7th (SEVENTH)** day of each month.
- 2.5 Aftercare fees are payable in **11 (ELEVEN)** installments from January to November;
- 2.6 If aftercare fees are not paid on or before the **7th (SEVENTH)** day of each month, my child will be denied access to the aftercare;
- 2.7 Aftercare fees are payable in the bank account of the school with the following details: **LAERSKOOL DANIE MALAN, ABSA BANK, BRANCH CODE: 509145, ACCOUNT NUMBER: 060260028, REF: YOUR FAMILY CODE/AFTERCARE.**
- 2.8 I undertake to pay the aftercare fees as follows (please choose and mark the with an x):

2.8.1 An initial payment of **R200.00 (TWO HUNDRED RAND)** on or before the **7th (SEVENTH) of January 2018**;

2.8.2 Thereafter a once off payment in the amount of **R9 590.00 (NINE THOUSAND FIVE HUNDRED AND NINETY RAND)** for the year payable on or before the **11th (ELEVENTH) of January 2018**.

OR

2.8.3 An initial payment of **R200.00 (TWO HUNDRED RAND)** on or before the **7th (SEVENTH) of January 2018** and the **1st** months installment of **R890.00 (EIGHT HUNDRED AND NINETY RAND)** on or before the **11th of January 2018**; and

2.8.4 Payment of **R870.00 (EIGHT HUNDRED AND SEVENTY RAND)** thereafter in **10 (TEN)** x monthly installments on or before the **7th** day of each month.

- 2.9 The aftercare will be entitled to institute action against me for any arrear aftercare fees through legal process which include costs thereto on a scale as between attorneys and own client, tracing fees if necessary and interest "*a tempora more*".
- 2.10 I will inform the aftercare should my marital status change to ensure that the correct party will be held responsible for the payment of the aftercare fees.
- 2.11 Any notice given to me by the aftercare due to non-payment ca be addressed to the address mentioned above and will serve as my *domicilium citandi et executandi* for purposes of service.
- 2.12 I will inform the aftercare in writing within 14 (FOURTEEN) days should my work or home address change.
- 2.13 I cannot apply for discount or exception of any aftercare fees.**
- 2.14 I cannot apply for my child to attend aftercare if I have school fee exemption.**

- 2.15 **My child will be refused to attend aftercare should my aftercare fees not be paid by the 7th (SEVENTH) day of the month.**
- 2.16 **My child will be refused to attend the aftercare if my school fees are in arrears.**
- 2.17 My child will be refused to attend aftercare should he/she not comply with the aftercare rules, or be disobedient.
- 2.18 I am not currently under administration or debt review (debt counselling) on in the process of applying thereof.
- 2.19 If I do not give notice before the **7 (SEVENTH)** of the month that my child will not be attending aftercare the notice will only be implemented in the following month and I will still be obliged to pay aftercare fees for that month.
- 2.20 I have no other financial obstruction where I cannot pay my monthly financial commitments.
- 2.21 Acceptance at the aftercare will be evaluated on a monthly basis and on the basis that aftercare fees and school fees are paid, but is not limited thereto.
- 2.22 All notices to the aftercare must be in writing before the **7th (SEVENTH)** day of the month and may be sent via e-mail to naskool@daniemalan.co.za.
- 2.23 One calendar months' notice should be given if your child will not be attending the aftercare. Such notice must be sent before the 7 (SEVENTH) of the month in writing and sent to the aftercare principal.

3. HANDLING OF PROBLEMS:

- 3.1 I may not solve any problem by myself to address any child at the aftercare regarding a problem.
- 3.2 No shouting or addressing a child by a parent will be allowed.
- 3.3 No parent will be allowed to address any aftercare personnel in from of other children or parents. The problem should be reported to the aftercare principal the principal will solve the problem and report back to the involved parents.
- 3.4 Any of the aforementioned actions of a parent will peruse to immediate eviction of a child from the aftercare.

4. DISCIPLINE, HOMEWORK AND GENERAL RULES:

- 4.1 I undertake that my child will behave him/herself and obey the aftercare rules;
- 4.2 The disciplinary policy of Danie Malan's aftercare is in accordance with the disciplinary policy of the school and is supported by the SGB;
- 4.3 No foul language, foul jokes or dis-abeyance or disruptive behavior will be tolerated. If your child is guilty of any of the above he/she will be reporte3d to the school's disciplinary committee;
- 4.4 The aftercare o the SGB disciplinary committee can at any time address a learner of misbehavior or not complying with the aftercare rules;
- 4.5 The aftercare cannot be held responsible for any damage or loss due to a child's behavior towards another child or his/her belongings;
- 4.6 I undertake to re-reimburse the aftercare for any damage or loss caused by my child to the property of the school / aftercare.
- 4.7 If a child does not adhere to the rules of the aftercare he/she will not be allowed to attend aftercare.
- 4.8 I do not have the authority to give my child permission /exemption of any the aftercare rules, activities, or procedures.
- 4.9 My child will attend homework class every day and will complete all homework and will adhere to the rules in the homework class.

- 4.10 Although the aftercare personnel attend to the homework, it is still the responsibility of the parents to ensure that all homework is done correctly.
- 4.11 If my child is dis-honest about homework the aftercare personnel cannot be held responsible for homework not done.
- 4.12 Writing down homework stays the responsibility of the child.

5. PERSONAL BELONGINGS:

- 5.1 All personal belongings should be marked clearly.
- 5.2 The aftercare personnel cannot be held responsible for the loss of any personal belongings.

6. AFTERCARE TIMES AND COLLECTING:

- 6.1 The aftercare operates during school terms from 14h00 – 17h30 Monday to Friday
- 6.2 The aftercare will be open during school holidays from 07h00 – 17h30 Monday to Friday unless otherwise decided by the aftercare principal due to, to little interest.
- 6.3 The aftercare will be closed on public holiday sand school holidays as indicated on the year calendar.
- 6.4 A fine of **R50.00 (FIFTY RAND)** will be given for every **5 (FIVE)** minutes a child is collected after 18h00 and will be payable in cash to the personnel on duty when collecting your child at aftercare.
- 6.5 After the 3rd (THIRD) time collecting your child after 18:00 your child will be refused to attend the aftercare.
- 6.6 All children have to be signed out in the register provided by the aftercare.
- 6.7 No child will be sent to the gate on request of the parents. Parents and authorized persons have to collect children at the aftercare and signed the register.
7. I understand and realize that if this application is accepted by the after-care center after the necessary signatures affixed below, there is a legal agreement between the parties arising lawfully and that can be enforced in court against me as defendant.

DATED and **SIGNED** at **PRETORIA-NORTH** on this ____ day of _____ **20**_____.

SIGNATURE OF FATHER/LEGAL GUARDIAN

SIGNATURE OF MOTHER/LEGAL GUARDIAN

NAME AND SURNAME OF FATER/LEGAL GUARDIAN

NAME AND SURNAME OF MOTHER/LEGAL GUARDIAN

LAERSKOOL DANIE MALAN

DEBETORDER INSTRUCTION: AFTERCARE 2018

(Only 1 form per family)

ACCOUNT HOLDER:

1. Full names and Surname: _____
2. Address: _____
3. Father (Cell) _____ Mother (Cell) _____ E-mail: _____
4. All the learners enrolled at Laerskool Danie Malan:

	FULL NAMES AND SURNAME	GRADE/CLASS	FAMILY NO.
a.			
b.			
c.			
d.			

MY BANK DETAILS ARE AS FOLLOWS:

1. Bank: _____
2. Branch name: _____
3. Branch Code: _____
4. Account number: _____
5. Type of account: _____ *Indicate with an x in the applicable block

CHEQUE

SAVINGS

TRANSMISSION

I hereby request and authorise you to debit my account on the 1st (FIRST) day of each month at above mentioned bank, from January with the amount of:

	Amount	ONCE-OFF	10 Months
Aftercare (registration fee)	R200.00	X	
Aftercare (January)	R890.00	X	
Aftercare (Feb – Nov)	R870.00		X

Conditions

1. If a payment of the debit order is refused for one month by the bank, the amount together with bank costs for the refusal will immediately be payable by myself into the bank account of Laerskool Danie Malan as indicated on the contract. If such fees are not paid my child will be refused to attend the aftercare until payment has been made.
2. If a debit order is refused twice, it will not be represented again and you will be responsible for the full amount and costs.
3. This authorization cannot be cancelled by myself unless I have given 1 (ONE) calendar months notice that my child will not be attending aftercare and all payments have been made.
4. I acknowledge that the party who is authorized for the deductions on my account, has no rights to give or cede any rights to a third party without my written permission and that I may not delegate any of my obligations to this contract to a third party without the written permission of the authorized party.

DATED and SIGNED at PRETORIA NORTH on this _____ day of _____ 20 _____.

SIGNATURE OF ACCOUNT HOLDER