

Little Flock

PRE-PRIMARY SCHOOL

Application for Admission / Conditions of Enrolment

(All fields must be completed with the exception of those marked with *)

Please download the Application Form onto your computer before filling in any details. Please use Acrobat Reader to fill in the form. If you do not have Acrobat Reader please download it here. The document has space for details of TWO pupils only. If you are applying for more than that, please fill out an additional form. Once complete please send the saved document as an attachment in an email to LFadmissions@littleflock.co.za

Date of Application:	DD/MMM/YY
Learners Full Name and Surname:	
Year of admission for which application is submitted:	
How did you hear about Little Flock?	

This form must be accompanied by (please cross or tick):

- R350 Registration fee paid and Proof of Payment sent to LFadmissions@littleflock.co.za (EFT only)
- R3000 Enrolment fee paid and Proof of Payment sent to LFadmissions@littleflock.co.za
- Last report from Previous School if applicable
- Copy of any Therapist Reports
- Completed Financial Clearance Certificate
- Birth Certificate
- Copy of Parent/Guardian's ID/Passport

• **PLEASE NOTE** incomplete applications will not be processed and we can only accept your child once the financial clearance certificate (where applicable) has been received and the registration and admission fees are paid. The registration and enrolment fee is not accepted as a cash transaction.

Key Contacts:

Landline: 011 462 2644 | Admissions: LFadmissions@littleflock.co.za | Website: www.littleflock.co.za

FOR OFFICE USE ONLY			
Start Date:	DD/MMM/YY		
Special Instruction:			
Grade:		Option:	<input type="radio"/> 3 <input type="radio"/> 5

Initial: _____ 1

FAMILY INFORMATION

Father's Surname:		Title:	
First Name:		ID / Passport Number:	Passport Country of Issue
Physical Address:			
Postal Address:		Postal Code:	
Cell Number:		Work Number:	
Church you Attend:			
Email:			
Occupation:			
Name of Employer:			

FAMILY INFORMATION

Mother's Surname:		Title:	
First Name:		ID / Passport Number:	Passport Country of Issue
Physical Address:			
Postal Address:		Postal Code:	
Cell Number:		Work Number:	
Church you Attend:			
Email:			
Occupation:			
Name of Employer:			

Sibling Information

Name:		Grade:		School:	
Name:		Grade:		School:	
Name:		Grade:		School:	
Name:		Grade:		School:	
Name:		Grade:		School:	



LEARNER PERSONAL INFORMATION:

Surname:					
Full Names:					
Preferred Name to be used on Labels:					
Enrolment Date:	DD/MMM/YY	Enrolment Grade:			
Gender:	<input type="radio"/> M <input type="radio"/> F	Date of Birth:	DD/MMM/YY	Current Age:	
ID or Passport Number:					
Child's Citizenship:			Country of Birth:		
Home Language:					
Previous school/s attended:					
Race: (This information is required by the Gauteng Department of Education and ISASA.)	<input type="radio"/> B	<input type="radio"/> W	<input type="radio"/> C	<input type="radio"/> I	<input type="radio"/> A
Is your child fostered or adopted:					
Name of learner's official parent / guardian:					
ID of learner's official parent / guardian:					
Are both parents living at home:	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Married <input type="radio"/> Divorced <input type="radio"/> Separated <input type="radio"/> Death			
Who does the child live with:					
No. of children in family:			Place of child in family:		
Are both parents allowed to collect your child?	<input type="radio"/> Yes <input type="radio"/> No				

If there is anything we need to know about your child to help meet his/her needs, please stipulate:

• **PLEASE NOTE** that all children must be able to speak English. Children who are not age-appropriately proficient in the English language will be expected to attend Language Enrichment Classes at their parent's expense.

PERSON RESPONSIBLE FOR ACCOUNT

Name:		Email:	
ID Number / Passport Number:		Passport Country of Issue:	
Contact Number:		Nationality:	
Are there school fees outstanding at the previous school?	<input type="radio"/> Yes <input type="radio"/> No		

I hereby declare that the information that I have given is true in every respect and that I have read and understood all that is contained in this form. I agree to be bound by the rules and regulations of the School and the Terms and Conditions set out in this Application Form and I understand that the completion of this form does not necessarily mean that the child will be admitted to the School.

I acknowledge that by signing this document I consent and authorise Little Flock to:

- contact, request and obtain information at any time from any supplier, service or credit provider (or potential credit provider) or registered credit bureau in order to assess my behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness and
- provide information about my behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness to any registered credit bureau or to any supplier, service or credit provider (or potential credit provider) seeking a trade reference regarding my dealings with Little Flock.

Child's Name #1:	
Child's Name #2:	
Child's Name #3:	
Child's Name #4:	

Parent / Guardian 1 Name _____ Signature _____

Date:
DD/MMM/YY

Place: _____

Parent / Guardian 1 Name _____ Signature _____

Date:
DD/MMM/YY

Place: _____

PARENT'S AGREEMENT

As the parent(s)/guardian of *(Full names of child)* _____

I/We hereby undertake:-

- To meet our/my financial obligation to the School timeously by ensuring that payments are made by the time agreed. (Para. 8 Terms and Conditions of Enrolment.)
- I agree to pay an administration fee of R500 per month for late payment of fees.
- I agree to pay the relevant penalty fee imposed for late collection of children from either half day or full day Aftercare and Holiday Care.
- I hereby note that the School Leadership is always willing to discuss any financial difficulty I may encounter, and I agree to communicate the same to them.
- To comply with the required one calendar month's written notice, should I/we need to remove my/our child/children for whatever reason.
- To keep open lines of communication with the School and Staff.
- Generally to do all I/we can, to ensure that my/our association with the School is a healthy and happy one.
- To advise the school of any change in contact details.

Parent / Guardian 1 Signature _____

Date: DD/MMM/YY

Parent / Guardian 2 Signature _____

Date: DD/MMM/YY

Initial: _____ 4

PAYMENT OPTIONS

Please select a Payment Option below:

Annual

Monthly by EFT

Monthly by Debit Order

DEBIT ORDER AUTHORITY AND MANDATE FOR PAYMENT INSTRUCTION

To only be completed if you selected Debit Order.

Given by (name of Accountholder):

Address:

Bank Name:

Branch and Code:

Account Number:

Type of Account:

Varies:

Abbreviated Name as Registered with the Bank: **LITTLFLOCK**

This signed Authority and Mandate refers to our contract dated _____ ("the Agreement").

I / We hereby authorise you to issue and deliver payment instructions to your Banker for collection against my / our abovementioned account at my / our above-mentioned Bank (or any other bank or branch to which I / we may transfer my / our account) on condition that the sum of such payment instructions will never exceed my / our obligations as agreed to in the Agreement and commencing on _____ and continuing until this Authority and Mandate is terminated by me / us by giving you notice in writing of not less than 20 ordinary working days, and sent by prepaid registered post or delivered to your address as indicated above.

The individual payment instructions so authorised to be issues must be issued and delivered as follows:

Select date for monthly debit order:

Day 1

Day 3

Day 10

In the event that the payment day falls on a Sunday, or recognised South African public holiday, the payment day will automatically be the preceding ordinary business day.

I / We understand that the withdrawals hereby authorized will be processed through a computerized system provided by the South African Banks and I also understand that details of each withdrawal will be printed on my bank statement. Each transaction will contain a number, which must be included in the said payment instruction and if provided to you should enable you to identify the Agreement. A payment reference is added to this form before the issuing of any payment instruction.

Mandate

I / We acknowledge that all payment instructions issued by you shall be treated by my / our above-mentioned Bank as if the instructions have been issued by me/us personally.

Cancellation

I / We agree that although this Authority and Mandate may be cancelled by me / us, such cancellation will not cancel the Agreement. I / We shall not be entitled to any refund of amounts which you have withdrawn while this Authority was in force, if such amounts were legally owing to you.

Assignment

I / We acknowledge that this Authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this Authority and Mandate cannot be assigned to any third party.

Signed at _____ on this _____ day of _____

(Name of Account Holder)

AFTERCARE SERVICE

The Aftercare service is available to all pupils attending Little Flock Pre-School. The following options are available for aftercare:

AD HOC – this is billed in arrears as and when the facility is used and does NOT include any holiday care. All children will be billed ad hoc Aftercare rates if the facility is used, unless a separate Aftercare form is completed for half/full day Aftercare.

Half day 13:00 – 15:00

Full day 13:00 – 17:30

Ad hoc applies to parents whose children come on a part time basis only, and to those children not collected by 13:00 daily.

FULL TIME AFTERCARE – this is billed in advance and is charged regardless if facility is used or not & includes holiday care:

Half day 13:00 – 15:00

Full day 13:00 – 17:30

An additional charge of R100.00 per 15 minutes, or part thereof, will be charged if a child is not collected by 15:00 for full time half day aftercare and 17:30 for full time full day aftercare (closing time).

*All children will be signed into Aftercare, if not collected by 12:45. Children must be signed out when collected or a full afternoon will be charged for. Water and sandwiches will be provided for children staying after 15h00. Parents must provide sufficient lunch in their child's lunchbox. **NO NUTS OR NUT PRODUCTS WILL BE ALLOWED!***

HOLIDAY CLUB SERVICE

Holiday Club is offered to all children during the school holidays and during the week-long Mid-Term break in June.

Half Day 8:00 – 13:00 | R40.00 per day

Full Day 8:00 – 16:00 | R80.00 per day

Please note that if you are signed up for Half or Full day Aftercare on a monthly basis, there is no charge for the equivalent usage at Holiday Club. Ad hoc users will however be charged the above rates for holiday club usage.

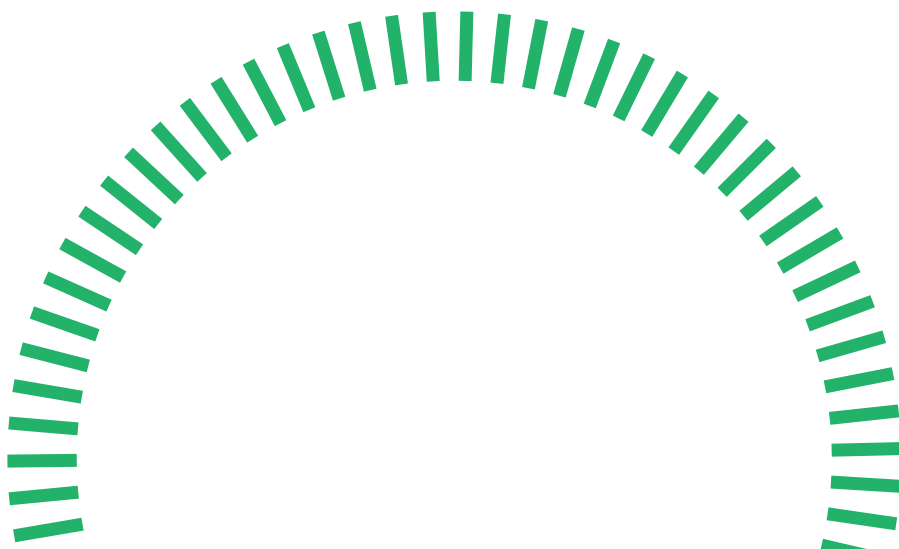
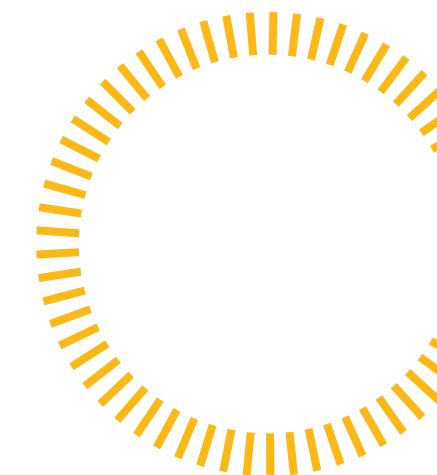


PHOTO PERMISSION

I hereby grant Little Flock permission to take photos of my child to be included on the Little Flock Website, Instagram, Twitter or Facebook in order to celebrate the School's or your child's activities, achievements or successes.

Yes No

Parent / Guardian Name:

Signature:

APPLICANT'S HISTORY

Has your child had any previous learning difficulties?

Yes No

If "yes" please indicate areas of intervention: (please tick the relevant block)

Occupational Therapy	<input type="radio"/>	Speech Therapy	<input type="radio"/>	Play Therapy	<input type="radio"/>
Remedial School Placement	<input type="radio"/>	Individual Education Plan	<input type="radio"/>	Full Assessment	<input type="radio"/>
Physiotherapy	<input type="radio"/>	Remedial Therapy	<input type="radio"/>	AIT	<input type="radio"/>

**Please include any reports with your application*

Has your child ever experienced any social or emotional difficulties at school?

Yes No

Does your child have any physical disabilities, allergies or medical conditions?

Yes No

If you have answered "yes" to any of the above questions, please explain below:

CONTACT PERSON IN CASE OF AN EMERGENCY (Other than parents)

Contact Person #1

Name:

Contact number:

Relationship to child:

Contact Person #2

Name:

Contact number:

Relationship to child:

MEDICAL DECLARATION AND INDEMNITY FORM

(All fields must be completed with the exception of those marked with *)

Learner's First Names:								
Surname:								
Date of birth:	Gender: Female or Male	<input type="radio"/> M	<input type="radio"/> F					
ID Number (Learner):								
Medical Aid Name:								
Previous illnesses including emotional instability*:								
Ongoing Medication*:								
Allergies*:								
Blood Type:	<input type="radio"/> A+	<input type="radio"/> O+	<input type="radio"/> B+	<input type="radio"/> AB+	<input type="radio"/> A-	<input type="radio"/> O-	<input type="radio"/> B-	<input type="radio"/> AB-
Has your child had their childhood vaccinations:	<input type="radio"/> Yes	<input type="radio"/> No						
If no, please state the reasons:								
<i>I acknowledge that my child may be exposed to childhood illnesses while attending Little Flock. I will not hold Little Flock responsible for any short or long-term effects my child may suffer as a result of exposure to such illnesses due to not having taken my child for their mandatory childhood vaccinations.</i>								
Please supply any other information that may be relevant*:								

INDEMNITY:

1. I permit Little Flock Pre-School to administer medication supplied by the parents as per Authorization Form / basic medical assistance where deemed necessary.
2. I permit Little Flock Pre-School to arrange medical treatment on my behalf in the event of an emergency.
3. I agree that I will not hold Little Flock Pre-School liable in respect of any injury or illness or related incident that arises out of the above mentioned student's attendance at the school or whilst she/he participates in any activity / sports event with the school.

Name of parent / guardian: _____

Signed: _____ Place: _____

Date:
DD/MM/YY

TERMS AND CONDITIONS OF ENROLMENT/ APPLICATION

Your attention is drawn to the following terms on which this application is made and would be considered.

1. A separate application must be completed for each child and only applications on these forms will be considered.
2. A Registration Fee of R350.00 is payable to the School at the time a new Application Form is submitted. No application will be processed until such time as this amount has been paid.
3. A once-off non-refundable Admission Fee of R3000.00 is payable within 21 days from acceptance of your child at Little Flock as per your Letter of Acceptance. For last minute applications, the Admission Fee is payable before the pupil can start school. No pupil will be admitted to the School unless the Admission Fee has been paid. (This amount may be adjusted annually when annual increases take effect.) **The Enrolment fee is only valid for 1 year, for the year of enrolment stated on the application form. Should the child not be enrolled within the year specified on the application form, the Enrolment Fee will be forfeited.**
4. School hours are **8:00 – 12:30**, Monday to Friday. The school follows the same calendar as The King's College and Preparatory School.
5. Children who are not age-appropriately proficient in the English language will be expected to attend Language Classes at the Parents' expense.
6. Children in Grade 000 and upwards must be potty trained.
7. There are three terms per annum.
8. The following payment options are available for the payment of school fees:
 - a) Monthly payments are payable on the **1st of every month** by debit order or EFT. If fees are not paid by the 10th of each month, an administration fee of R500 will be charged for each month the amount remains outstanding.

Little Flock banking details are as follows:
FNB Current Account
Acc no: 62328637197
Branch: Bryanston
 - b) There is a discount if fees are paid annually. Annual payments must be made **before** the first day of the school year. If annual fees are paid later than this then the discount will be added back to the account. The interest on fees paid in advance is accrued to the School and not to the account.
9. There may be additional charges that will be billed over and above the annual or monthly fees. These items may vary from grade to grade and will be billed as and when they become due.
10. If fees are not paid by the 10th day of the month in which they are due and not paid in full by the end of that same month, the school services will be suspended to the child/ren **until arrangements for the settlement of the outstanding fees have been agreed upon**. The School leadership however is always open to discuss your situation with you at any time.
11. All school accounts for the year must be paid in full by 10th DECEMBER of the academic year otherwise pupils will not be accepted back the following year, unless special dispensation is granted by the Finance Team.
12. Fees are payable in advance on either an annual or monthly basis by way of debit order or EFT.
13. Fees are reviewed on an annual basis.
14. The following options are available for Aftercare:
 - a) Monthly (charged in advance for entire month regardless if facility is used or not):
 - Half day (13:00 – 15:00), includes holiday care until 15:00
 - Full day (13:00 – 17:30), includes holiday care until 17:30

An additional charge of R100.00 per 15 minutes, or part thereof, will be charged if a child is not collected by 15:00 for half day and 17:30 for full day.
 - b) Adhoc (charged in arrears as and when facility is utilised):
 - Half day (13:00 – 15:00), does not include holiday care – this will be charged over and above
 - Full day (13:00 – 17:30), does not include holiday care – this will be charged over and above
15. One calendar months' notice, in writing, of the proposed removal of a child from the school must be given or alternatively, the fee for the month in lieu of such notice must be paid.
16. Whilst every effort will be made to ensure the safety of the children at all times, you are required to appoint and hereby do appoint the principal and/or other authorized persons to act, if deemed advisable by such persons, on behalf of the child in loco parentis.
17. The parents / guardians / responsible parties agree to indemnify and hold blameless the Church, the School Finance Team, its Principal and staff, or their authorized agents or representatives, against any and all claims, howsoever arising, including negligence, but not gross negligence, whether claimable by us, or by the pupil, or by any third party arising out of injury, death, loss, damage, costs or expense including legal costs, suffered by the pupil while enrolled at the School.
18. The signatories accept that any personal property belonging to either pupils / parents / guardians / responsible parties is not insured by Little Flock Pre-School, and that they have no claim against the School for loss, theft or damage to such property.

19. If your child is admitted to the school you are hereby advised of the terms and conditions upon which such admission is made. You will be required to accept and agree to the same.
20. All correspondence between the School and signatories will be done via e-mail or via our communication portal or via the pupil's Talking Book. The responsibility for receiving correspondence, especially accounts due for payment, lies with the signatories.
21. If the Principal, at any time, requires that a pupil be removed from the school, full fees and disbursements payable in respect of such a pupil will remain due to the School except to any extent decided by the School Finance Team.
22. Your attention is drawn to the fact that the Little Flock Pre-School is governed by the Church Leadership of the New Covenant Church, and the principles espoused by the leadership will be promoted in the school.
23. Admission to the school is at the discretion of the Church Leadership whose decision on all matters relating to the school is final and binding.
24. The parents / guardians / responsible parties hereby nominate the home address appearing on the application form as their chosen domicilium citandi et executandi for services of all notices or legal process in connection with any claim/s arising from this application. The parents / guardians / responsible parties need to advise the School immediately should the home address change.

Parent / Guardian 1 Signature _____

Parent / Guardian 2 Signature _____

FINANCIAL CLEARANCE CERTIFICATE

Please submit this to your current school Head or Bursar for completion and signature. Please download the form onto your computer before filling in any details. Please use Acrobat Reader to fill in the form. If you do not have Acrobat Reader please download it here. Once complete please send the saved document as an attachment in an email to LFadmissions@littleflock.co.za

Name of Learner:			
Name of person responsible for fee payment:			
ID no. of person responsible for fee payment:			
Name of school where pupil is currently enrolled:			
Telephone number of school:			
Annual fees for –	Year:		Amount: R
Fees paid to date:	R		
Fees outstanding:	R		

Comment:

I understand that enrolment is contingent upon financial clearance from the previous school. Therefore, and in line with the school's current privacy policies pertaining to the processing of personal and credit information in accordance with the National Credit Act No. 34 of 2005 ("NCA") and the Protection of Personal Information No. 4 of 2013 ("POPIA"), I authorise that my credit information may be processed only for purposes of obtaining financial clearances as stated herein above.

Please email the completed certificate to the Little Flock Admissions Department - LFadmissions@littleflock.co.za



School Stamp

Bursar / Principal Signature _____ Name _____

Date DD/MM/YY

Parent 1 Signature _____ Parent 2 Signature _____

Date DD/MM/YY