

Application Date:

Administration Number:

Account Number:

ENROLMENT FORM **SECTION A: CHILD INFORMATION**

Date of Birth:

I.D. Number:

Date of enrolment: Grade:

Full Name of Child: (First and Surname)

Residential Address:

Postal Code:

Postal Address: Postal Code:

Telephone Number (home):

Cell Number:

Gender:

Religion:

Home Language: Eng / Afr / Other

Present / Previous School:

Present Grade: Years in Grade:

Grade/s repeated:

Family doctor and telephone number:

Emergency Contact: name / tel. no. :

Health problems / allergies, etc.:

Learning barriers / speech, concentration, etc:

Is or has any intervention taken place, if so please specify?

Who will transport child to school and back:

FATHER'S INFORMATION

Father's Full Name: (First and Surname)

I.D. Number:

Occupation:

Employer / Company:

Residential Address:

Postal Code:

Postal Address:

Postal Code:

Home Tel No: Work Tel

Cell Number:

E-mail address:

MOTHER'S INFORMATION

Mother's Full Name: (First and Surname)

I.D. Number:

Occupation:

Employer / Company:

Residential Address:

Postal Code:

Postal Address:

Postal Code:

Home Tel No: Work Tel No.:

Cell Number:

E-mail address: