

#### 2025 Enrolment Pack

Child's Name:

### Admission Form (1)

	Child's Details	
Name & Surname		
Date of Birth		
Gender		
Start Date:		
Programme (please circle)	Half Day (14:00) Premium	Full Day (18:00) Basic
Physical Address		
Home Language		
Marital Status of Parents		
Child's Character		
Child's Position in the Family		
Mothe	er's / Caregiver's Details	
Name & Surname		
ID / Passport Number		
Employer & Occupation		
Home Telephone No.		
Cell Number		
Email		
Signature		



### Admission Form (2)

Father's / Caregiver's Details			
Name & Surname ID / Passport Number Employer & Occupation Home Telephone No.			
Cell Number Email Signature			
Jigiiquic			
	Emergency Contact		
Name & Surname			
Contact Number			
Relationship to Child			
	Medical Details		
Medical Aid Name			
Medical Aid Number			
Doctor's Name			
Doctor's Contact Number			
Any Chronic Illnesses			
Any Allergies			
Any Impairments or Disabilities			



# Consent & Indemnity

I,
• The participation of my child/children in the activities of Abacus Kidz Academy; • I hereby unconditionally and irrevocably indemnify and hold harmless Abacus Kidz Academy and/or its employees and other staff against all and may losses, claims, action damages or costs which may be made against and/or suffered by Abacus Kidz Academy and/or its employees and other staff, whether arising out of injury to, or death of, the child/children, who is/are enrolled at Abacus Kidz Academy while the child/children attends and/or participates in the activities of Abacus Kidz Academy whether succlaims, actions, losses, damages (whether direct, consequential or otherwise) or costarise from breach of any contract relating to the said child/children's admission Abacu Kidz Academy and whether such contract is terminated or not, or arising from an negligence (whether total or contributory) on the part of Abacus Kidz Academy and/or
<ul> <li>its employees or other staff.</li> <li>I hereby agree to enrol the above child/children at Abacus Kidz Academy subject to the</li> </ul>
terms and conditions as laid down.  I hereby give consent for my child/children to be taken to the doctor's @ Bluebir Shopping Centre or the nearest appropriate medical facility in case of emergency. C specify doctor within a 3km radius of the school
• I hereby authorise Abacus Kidz Academy to administer non-prescription medicine (e.e. Panado, Lotem, Buscopan, Imodium, throat lozenges etc.) and first-aid treatment to medical in the event of injury or mild illness. This is with the understanding that an serious injury will be referred to a medical doctor or medical institution.
• I further give permission to the Principal or Vice-Principals to seek the help of a doctor in an extreme emergency. To give permission for the administration of anaesthetic in case where parents cannot be reached and we will accept all expenses incurred.
Signed :
Please print your name:



#### Terms & Conditions (1)

1. The R2200 annual developmental levy, is payable before admission, and is non refundable.

Initial

2. We take no responsibility in the case of lost clothing due to the fact that it was not marked properly.

Initial

3. We understand that should my child be removed from Abacus Kidz Academy, that the Impaq fee remains due for the remainder of the year.

Initial

4. We understand that Abacus Kidz Academy is registered with various credit bureaus, and agree that Abacus Kidz Academy may perform a credit search based on our application.

Initial

5. Should we fail to honour our commitment to pay all fees to Abacus Kidz Academy, Abacus Kidz Academy reserves the right to submit details of our non-performance with various bureaus who may share such information with other credit providers and customers for prescribed purposes. Said information could affect future school applications.

Initial

6. We understand that this is a legal and binding contract between us and Abacus Kidz Academy. The school shall be entitled to instruct its attorneys to attend to the collection of outstanding accounts and the parents will be liable for the payments of all costs incurred.

Initial

7. We agree that non-refundable annual developmental levy is to be paid prior to the first day of the start of school, via EFT. Placement is not secured until the levy has been paid.

Initial

8. We agree that all payment are payable before the 1st of every month,

Initial

9. If school fees are not paid in full by the 1st of the month, we accept a penalty fee of R5O per day that fees are late, to be added to my invoice.

Initial

10. Should our fees not be paid, Abacus Kidz Academy reserve s the right to ask me to leave my child at home until such time as fees are paid. If these fees are not settled by the following month, Abacus Kidz Academy will ask me to remove my child so that they can fill their place with another child on their waiting list and all outstanding fees be paid up.

Initial

#### Terms & Conditions (2)

- 11. We understand that school fees are due irrespective of absenteeism due to illness, vacation or any other reason whatsoever.
- Initia
- 12. We acknowledge that if my child is enrolled for half day that they will be collected by 14:00 Monday to Friday and for full day by 18:00.

Initial

13. I accept that the late collections are subject to a late collection fee of R75 per half hour (or part thereof) and is payable in cash to the staff member on the day of late collection.

Initial

14. Abacus Kidz Academy must receive two month's written notice, if the child is going to leave the school. This written notice must be handed to the principal at the school on the 1st of the month. This is in accordance with this agreement signed when applying for my child's admission. Please note that no notice for the year will be accepted after end of August of the year. School fees are paid over 12 months, Thus December fees remain due.

Initial

15. Extra murals are at the parents' cost and not the school's. Contracts, payment and enrolments for extra murals are to be done with the service provider directly.

Initial

#### POLICY AND PROCEDURES AGREEMENT WITH SICK CHILDREN

Parents are required to assist us in preventing cross infection of the learners and therefore we have implemented the following rules:

- Children with lice, ring worm, chicken pox, eye infections or any other contagious disease are not permitted at school and require a doctors clearance certification prior to returning to school.
- Children with runny tummies or vomiting are not permitted at school and require a doctors clearance certificate upon return to school.
- Should a child be prescribed antibiotics, the child will not be permitted back at the school for the first 48 hours and we will require a doctor's clearance certificate upon return to school.

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I accept these rules and policies regarding sick children.

Child's Name	 ID/Passport No	
Caregiver 1 Name	 Caregiver 2 Name	
Signature	 Signature	
Date:	 Date:	



# Application Checklist

Signed & Completed Admission Form (2 pages)
Signed & Completed Consent & Indemnity Form
Signed & Completed Terms & Conditions (2 Pages)
Copy of Child's Birth Certificate
Copy of Child's Clinic / Immunization Card
Copy of Medical Aid Card
Copy of Child's Last Report
Copy of Mother's or Caregiver's ID / Passport
Copy of Father's or Caregiver's ID / Passport
Annual Developmental Levy(R2200) (by EFT)

Banking Details						
Bank	First National Bank (FNB)	Name	Abacuskidz (Pty) Ltd			
Account Number	62841467948	Account Type	Business Account			
Branch Name	Melrose Arch	Branch Code	260231			
Reference	"Your Child's Name"					



## Requirements

#### • We offer:

- All stationery (Excluding Impaq Books)
- All meals & snacks
- Water, tea & juices
- Sun block
- Educational shows
- Swimming, Gymnastics and Physical Education included within your fees

