



APPLICATION FOR ENROLMENT

I request registration of the undermentioned learner on your school's waiting list for admission to the school as and when possible in accordance with the decision of the Governing Body.

On acceptance and prior to my learner's entrance to Kloof Pre-Primary School, I shall pay a non-refundable admissions fee of R2000.00.

Name of Learner: Sex:

Date of Birth: DD.....MM.....YYYY.....

(Please supply a copy of your child's birth certificate and immunization card)

Year in which your Admission is desired:

Name and title of Parent\Guardian:

Domicillium Address: (Address to accept delivery of all notices or correspondence)

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Parent 1 Name and Title:

Occupation:

Business Name:

Business Telephone: Cell Phone: Home:.....

Email:

ID Number:

Parent 2 Name and Title:

Occupation:

Business Name:

Business Telephone: Cell Phone: Home:.....

Email:

ID Number:

Signature of Parent 1:

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Date:

Signature of Parent 2:

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Date:

Signature of School Secretary:

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Date:.....