



APPLICATION FOR ENROLMENT

I hereby request application for enrolment 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 School Governing Body. On acceptance and prior to my learner's admission into Kloof Pre-Primary School, I shall pay a non-refundable acceptance fee of R2000.

LEARNER'S DETAILS:

First Names: Surname:

Preferred Name at School: Sex:

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

Domicillium Address (Residential address to accept delivery of all notices or correspondence **NOT** PO. Box or work address):
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Postal Address (If Different to Above):

PARENT / GUARDIAN 1 DETAILS:

Full Name and Title:

Occupation:

Place of Employment: Business Telephone:

Cell Phone: Home/Other:

Email: ID Number:

Parent/Guardian 1 Address (Residential address to accept delivery of all notices or correspondence **NOT** PO. Box or work address):
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PARENT / GUARDIAN 2 DETAILS:

Full Name and Title:

Occupation:

Place of Employment: Business Telephone:

Cell Phone: Home/Other:

Email: ID Number:

Parent/Guardian 2 Address (Residential address to accept delivery of all notices or correspondence **NOT** PO. Box or work address):
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Please provide proof of guardianship if not registered parents on the learner's unabridged birth certificate.

CERTIFIED COPIES OF BOTH PARENT'S / GUARDIAN'S ID & LEARNER'S UNABRIDGED BIRTH CERTIFICATE REQUIRED

Signature of Parent 1:

Signature of Parent 2:

Signature of School Secretary:

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Date:

Date:

Date: