



071 480 3847
 info@bushwillow.co.za
 www.bushwillow.co.za

Application form

Learner 1 details									
First names					Surname				
Preferred name	N/A				Date of birth	dd	mm	yyyy	
ID number					Nationality	South African			
Home language					Grade completed	N/A			
Medical aid number	N/A				Medical aid head member	N/A			
Previous school	N/A				Religion	Anglican	Apostolic	Buddhism	Catholic
Ethnic group	African/Black	Coloured	Indian	White		Christian	Hindu	Islam	Judaism
	Asian	Other	Specify			Lutheran	Methodist	Protestant	Other
Dexterity	Left handed		Right handed		Gender	Male		Female	
Allergies									
Medical condition(s)									
Has your child seen any therapist? e.g. speech, occupational, psychologist, etc				Yes	No	Please attach therapist's report		Report attached	Report not available
Therapist type & details									
Does your child have any special needs?		Yes	No	If yes provide details					
Learner 2 details									
First names					Surname	Same as above			
Preferred name	N/A				Date of birth	dd	mm	yyyy	
ID number					Nationality	Same as above			
Home language	Same as above				Grade completed	N/A			
Medical aid number	Same as above				Medical aid head member	Same as above			
Previous school	Same as above				Religion	Same as above			
Ethnic group	Same as above				Gender	Male		Female	
Dexterity	Left handed		Right handed		Allergies				
Medical condition(s)									
Has your child seen any therapist? e.g. speech, occupational, psychologist, etc				Yes	No	Please attach therapist's report		Report attached	Report not available
Therapist type & details									
Does your child have any special needs?		Yes	No	If yes provide details					

Learner 3 details											
First names				Surname	Same as above						
Preferred name	N/A				Date of birth	dd	mm	yyyy			
ID number				Nationality	Same as above						
Home language	Same as above				Grade completed	N/A					
Medical aid number	Same as above				Medical aid head member	Same as above					
Previous school	Same as above				Religion	Same as above					
Ethnic group	Same as above				Gender	Male		Female			
Dexterity	Left handed		Right handed		Allergies						
Medical condition(s)											
Has your child seen any therapist? e.g. speech, occupational, psychologist, etc				Yes	No	Please attach therapist's report		Report attached		Report not available	
Therapist type & details											
Does your child have any special needs?	Yes	No	If yes provide details								
Parent 1 details											
Title	Mr	Mrs	Other (Specify)		First names						
Surname	Same as above				Preferred name		N/A				
<u>Your current</u> marital status	Married	Single	Divorced	Widowed	<u>Child's family</u> status		Married	Single	Divorced	Widowed	
ID number				Passport number (if no ID number)		N/A					
Gender	Male		Female		Home language		Same as above				
Nationality	Same as above				Ethnic group		African/Black	Coloured	Indian	White	
Home phone number						Asian	Other	Specify			
Cellphone number						Email					
Work telephone number						Preferred communication method		Sms	Email	Post	Hand
Physical address				Postal address		N/A					
						Same as physical					
				Post code				Post code			
Employer				Employer address							
Occupation											
Employment sector, e.g. agriculture, construction								Post code			
Guardian type (e.g. mother, father, foster parent, etc)				Names & ages of child's siblings not on page 1							
Lives with child	Yes		No		Who else lives with child						
Mother alive or deceased & year of death	Alive	Deceased	yyyy		Father alive or deceased & year of death		Alive	Deceased	yyyy		
Who normally fetches your child				Who else is authorised to fetch your child							
Parent 1 is primary point of communication	Yes		No		Learner has Parent / Guardian 2		Yes		No		

Parent 2 / Additional guardian									
Title	Mr	Mrs	Other (Specify)		First names				
Surname	Same as above				Preferred name	N/A			
Your current marital status	Married	Single	Divorced	Widowed	Home language	Same as above			
ID Number					Passport number (if no ID number)	N/A			
Gender	Male		Female		Ethnic group	African/Black	Coloured	Indian	White
Nationality	Same as above			Asian		Other	Specify		
Home phone number	Same as above				Work phone number				
Cellphone number					Email				
Lives with child	Yes		No		Preferred communication method	Sms	Email	Post	Hand
Physical address	Same as above				Postal address	Same as above			
			Post code				Post code		
Employer					Employer physical address				
Occupation									
Employment sector, e.g. agriculture, construction							Post code		
Guardian type (e.g. mother, father, foster parent, etc)					Parent 2 also receives communication from school			Yes	No
Alternative contacts in case of emergency									
Name 1			Relationship to child			Contact number			
Name 2			Relationship to child			Contact number			
Child's doctor					Doctor's contact number				
Person responsible for paying school fees									
Name					Contact number				
Email					Relationship to learner				

Photos and videos permission form

As part of our documentation and observations, staff or a representative of Bushwillow School may record photos or videos of your child and display them in the class or in your child's personal file. We may also use these photos on our website and Facebook page.

Please indicate if you give permission for your child to be photographed or videoed.

I/we give permission

Name: _____

Name: _____

Signed: _____

Signed: _____

Additional items

Please accompany the following items with the application form:

1. A copy of your child's birth certificate.
2. A copy of your child's clinic card (if available).
3. A copy of the parents' ID books or passports.
4. A copy of your child's latest progress report (if available).
5. A photo of your child. Can be sent by email or whatsapp to details on top of page 1.
6. Note: to secure your place in the class, enrolment fee is due within 7 days of acceptance letter.

Conditions of enrolment

1. The applicant(s) is/are responsible for payment of fees of (full names) _____ (hereafter referred to as the learner).
2. The applicant(s) and the learner will be bound by all and any rules, regulations, policies and procedures of the school as laid down by the Trust.
3. The applicant(s) acknowledge that they are aware of, and agree to, the fact that the one-off enrolment fee (see Annex A) paid with regard to the learner is non-refundable and will be forfeited in the event of me cancelling the registration of the learner. In the unlikely event that your application is declined by Bushwillow School, this enrolment fee will be refunded in full.
4. **All tuition fees (see Fee Structure attached) shall be due and payable monthly in advance BEFORE the first day of each month.**
5. Should the applicant(s) choose to terminate the learner's enrolment at the school, the applicant(s) shall give a full term's written notice to the school, failing to do so, the applicant(s) shall be obliged to pay the terms fees in lieu of notice together with any other amounts due to the school and prior to the learner leaving.
6. The school shall give the applicant(s) 2 months' written notice of any increase in fees.
7. The applicant(s) hereby indemnifies the school and its staff or their authorized agents against any and all claims arising out of any injury, loss of life, loss, damage, costs, and expenses including legal costs suffered by the learner or applicant during the enrolment of the learner, knowing that the staff will take all reasonable precautions to ensure the safety and welfare of my child.
8. If any legal action has to be taken with regard to unpaid school fees, any legal, debt collector and administrative fees charged in recovering the debt will be for the applicants' account, inclusive of collection commission, stamps, postage, etc.
9. The applicant(s) hereby authorize Bushwillow Primary School to check their credit rating for the purpose of the enrolment procedure. Bushwillow Primary School undertakes to keep this information confidential.
10. Bushwillow Primary School reserves the right to ask anyone not complying with our rules and regulations to leave without notice or refund.
11. Bushwillow Primary School reserves the right to decline applicants.

As applicant(s) for Bushwillow Primary School, we agree to be bound by the above mentioned terms and conditions of enrolment.

Signature of both parents/guardians

1) _____

2) _____

Date: _____

Date: _____

Fee structure

Please retain this page for your future reference

Our fee structure for the 2019 school year is as follows:

Full-time enrolment

Monthly school fee (12 months – to be paid by the 1st of every month)	Pre-primary: R900 (age 3-5) Primary: R1700 (Grade R-7)
Sibling discount	Pre-primary: not applicable Primary: R 170 / month (10%)
Enrolment fee (to be paid at registration)	Pre-primary: R900 Primary: R1700
Stationery fee (to be paid by 31 December 2018)	Pre-primary: R600 Primary: R 600

Activity Day (Fridays)

Day Fee	R100.00 per child or R150.00 per family
Sibling discount	n/a

Our bank details:

Account holder: Bushwillow School Trust
Bank: First National Bank
Branch code: 240154
Account number: 62633819977
Type of account: Cheque

Please return the completed application form:

- by email to: stephen@bushwillow.co.za
- or by hand at the school to Teacher Julie