



TWEENSY WEENSY ADVENTURERS ADMISSION APPLICATION FORM

LEARNER'S DETAILS		
Registration Date		
Where did you hear about us		
Surname		
Full Names (As per birth certificate)		
Identity Number (ID) As per the birth certificate		
Nationality		
Race		
Gender		
Date of Birth (DD/MM/YY)		
Current age		
Enrolling Grade (e.g. 000, 00, 0)		
Previous School contact details (info Compulsory)		
Reason for leaving the school		
Home language		
Religion		
Do you require daily aftercare service? (daily rate)	Yes	No
Residential Address (compulsory)		
Postal Address		
Telephone numbers		
Contagious Illness already had		
Is your child on any Chronic medication? (provide details)		
Does your child require any special medical needs, or have any disabilities? (provide full details)		
Any allergies you are aware of (This is very important. Even if there are no allergies known at the time, please		

indicate)	
Is your child's immunization record up to date? Yes or No (Provide details)	
Doctor's Contact details (Tel numbers & emails – GP & Specialists)	
Medical Aid Details-Medical Aid Member number, main member, option & your child's dependent code (Provide a copy)	

PARENTS'S DETAILS		
	Father	Mother
Parent/ Person responsible for school fees (Tick- Compulsory)		
Surname		
Initials		
ID Numbers		
Parent living with the child (Tick)		
Occupation		
Work Address		
Telephone Work		
Cell phone		
Email Address		
Marital status		
Religion		

DETAILS REGARDING OF FRIENDS OR FAMILY ENTRUSTED TO COLLECT THE CHILD (PREFERABLY AN ADULT)	
Name & Surname	
Physical Address	
Postal Address	
Telephone	
Cell Phones	2
Relationship with the Child	

EMERGENCY CONTACT DETAILS	
1.Name & Surname	
Relationship with the child	
Cellphone number Home Tel	
Email	
2.Name & Surname	
Relationship with the child	
Cellphone number Home Tel	
Email	

Mother's Signature

Date _____

Father's Signature

Date _____

For official use (On Behalf of the School) _____

Date

OUR BANKING DETAILS

Bank: First National Bank

AccountHolder: Teensy Weensy Adventurers (PTY)

Account No: 62658508258

Branch: Carlswald

BranchCode: 250117

Send the proof of payment to: Teensyweensy.adventurers@gmail.com or send WhatsApp to 082 739 5934 or 071 557 068

SIGNATURE OF THE ACCOUNT HOLDER

I/we , the undersigned (print) _____ ID No's _____
being the parents or guardians of a child/ Children _____ do hereby indemnify and hold harmless Teensy Weensy Adventurers (Pty) Ltd and its members or employees and or representatives or acting agents in good faith or anyone entrusted to help out at school, against all liabilities, claims for damages (patrimonial or non-patrimonial) arising out of any injury or loss sustained by reason of the use of the school's premises or equipment or as a result of anything not maliciously done or omitted by the said Centre or any of its members or entrusted parties, during such time as my said child(ren) attend(s) the school, on or off the premises.

Furthermore, I/we give permission to the school to take my child on outings or excursions organized by the Centre which will be pre-arranged. I also give permission or consent to the school to take medical action in the event of any injury or illness (critical medical situation), if the school is unable to contact me. In the light of the latter, the school therefore reserves the right to utilize the quickest medical service available. The terms of this consent and indemnity will be applicable for the duration of the time that my child/children is/are enrolled at the Centre.

As per the above, names Identity numbers and signatures below, I/ we hereby certify that the information provided for admission is complete and accurate. We acknowledge that that the enrollment is subject to, inter alia, signing the admission contract that contains terms and conditions and requirements for admission. We also authorize the school and or any of its associates to conduct any credit enquiries on us as maybe necessary from time to time. We acknowledge that we have read and familiarize ourselves with school specific policies and school rules and will accept an offer of placement for our child at the school in accordance with the school terms and conditions. These documents as amended from time to time are available on the official school website or directly contact the school if the need arises.

I/we understand that the responsible person will take reasonable precautions to ensure the safety and well-being of my/our child.

Signature: Parent/ Guardian (1) _____ Date _____

Signature: Parent/ Guardian (2) _____ Date _____

Signature: Authorized School Representative _____

Date:

Necessary supporting documents

NB. The application will only be processed if all the fields are completely legibly, are signed and all necessary supporting documents are attached. You are requested to initial all the pages of the admission including this page.

Below are the supporting documents required, kindly tick (✓) in each box if the document is attached.

- Certified Copy of an Unabridged Child Birth Certificate
- Certified copy of Child's immunization clinic card record
- Certified copy of proof of residence
- Certified Copies of both parents' ID Father Mother
- 2 recent colour ID or passport photos to be attached on the first page of the forms
- Certified Copy of the pay slip or salary advice (person responsible for payment of the account as per the above, (Refer to page 2 of the form on parents' details).
- Deposit slip (POP) of Non Refundable Development fund R 1200.000
- Deposit of non-refundable for re-registration Fee of R350
- Deposit slip (POP) of Monthly school (R1100 and R1230.00 for No- nappies and nappies children respectively)
- Proof of payment for Registration, school fees and uniform to be attached. Payments deposits for the school uniform should be made separately from the school fees or registration. (Kindly use T- uniform as a reference for the uniform payments
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Kindly sign and initial each page of the form including this one