





TELEPHONE (HOME)																			
(CELL)																			
EMAIL ADDRESS																			
OTHER IMPORANT INFORMATION																			
DATE																			
SIGNATURE																			

**WHO WILL BRING/COLLECT YOUR CHILD IN THE MORNING/AFTERNOON?**

NAME:																			
TELEPHONE																			
NAME																			
TELEPHONE																			

**PERSON RESPONSIBLE FOR THE ACCOUNT:**

NAME:																			
SURNAME:																			
DATE OF BIRTH																			
I D NUMBER																			

I (person responsible for account) wish to enrol my child ..... at Little Sunbeams Pre-primary School.

I ..... have read and understand the rules and procedures of Little Sunbeams Pre-Primary and agree to abide by the rules and procedures as set out.

I hereby undertake to pay the fees of R..... as indicated below, in advance by the 3rd day of every Calendar month.

No subtraction of fees will be taken into consideration because of absence, illness or holidays.

Should I elect to send my child ..... days a week to school, I will be liable to pay the daily rate for the set amount of days above, irrespective of absenteeism or school holidays for the duration of the school year.

I hereby also fully understand that a penalty of R15,00 a day as well as interest, will be charged on overdue accounts, should I fail to pay by the 3<sup>rd</sup> of each calendar month.

I understand that if the account goes into 60 days, my child may not return to Little Sunbeams until the full amount outstanding is paid

**Method of paying (School fees): (Please select one option in each section)**

<input type="checkbox"/>	<b>In Full</b>
<input type="checkbox"/>	<b>Per term</b>
<input type="checkbox"/>	<b>11 months</b>

**Electronic banking only please.**

**DATE:** ..... **Signature of Parent:** .....

**DISCLAIMER**

**Children attending this school do so at their own risk and we absolve the (school) and/or persons acting on its behalf and hold them harmless against any claim whatsoever may arise following upon injury to or the death of the child in question or any loss or damage to his/her/our property howsoever the same may be caused**

**DATE:** ..... **Signature of Parent:** .....

**This contract will be null and void should it be manually altered in anyway.**

