



# MONTESSORI

PRE-PRIMARY SCHOOL RUSTENBURG

## Enrolment Form

Full Name of Child	
Date of Birth	
Gender	
Name of Siblings (R200 discount per sibling)	
Year of Admission	
Known Allergies	
Medical Aid	
Membership Number	
In Case of Emergency which Parent Should be Contacted First?	
Alternative Contact Person and Number in Case of Emergency	
ID number of Alternate Person who May Collect from School	
Does your Child Require a Special Diet?	
Are there any Medical Requirements that You would like Staff to be Aware of?	
Family Contact Number	
Vaccinations	Please provide copy of Vaccination/Clinic card

**R500 non-refundable placement fee to accompany this enrolment form.**

<b>Details of mother</b>	<b>Details of father</b>
Name:	Name:
Surname:	Surname:
ID Number:	ID Number:
Physical address:	Physical address:
Postal address:	Postal address:
Home Tel:	Home Tel:
Work Tel:	Work Tel:
Cell phone:	Cell phone:
Email address:	Email address:
Occupation:	Occupation:

**MARITAL STATUS:** Married  Separated  Divorced  Widowed  Single  Other

**AVAILABLE TAXI SERVICES CURRENTLY BEING USED BY PARENTS REQUIRING THIS SERVICE.**

ORMARH 063 307 9561  
MONTY 078 416 5075  
ITUMELENG 079 210 4148  
TUMI 079 325 3461

**CONSENT AND INDEMNITY**

Full name and Legal Guardian of Child \_\_\_\_\_

Residential Address \_\_\_\_\_

Child's Name: \_\_\_\_\_

I do hereby give consent for my child to take part in the activities of the Montessori school including classroom and playground activities as well as any excursions that may be arranged by the school.

I fully understand and accept that all activities shall be participated in at my child's own risk. On behalf of myself, my executors, my wife/ husband and my child, I hereby indemnify, hold harmless and absolve the principal and staff against any and all claims whatsoever that may arise in the connection with the loss of or damage to the property, of injury to the person of my child in the course of activities in the knowledge that all responsible precautions will nevertheless be taken for the safety and welfare of my child.

In the event of an emergency please provide a name and a phone number we can contact \_\_\_\_\_

Who will bring your child to School? \_\_\_\_\_

Who will collect your child from School ? \_\_\_\_\_

Please provide any other information below which could affect his/her behaviour, eg allergies, medication, divorce etc.

.....  
.....  
.....  
.....

Signature .....

Date.....

**FACEBOOK**  
**CONSENT REQUEST**

I regularly update our Facebook page and I would like your permission to photograph or video your child while at school during work periods or when they are doing any extra mural activities. Our Facebook page is Rustenburg Montessori.

No names or other personal information of your child will be published.

I/ We .....(give/do not give) permission for  
..... to be photographed or appear on video  
while attending school.

Signed .....

Date.....

**FEE STRUCTURE.**

January. R1300.00  
Feb.-Nov. R2,600.00 p/m  
December No Charge.

Annual Fee R27,300.00

5% Discount  
On Annual Fee R25,935.00  
Paid by 28<sup>th</sup> Feb.

Sibling Discount: R 200 per child per month.

The aftercare is operated by Teacher Martina Mwawa. Payment for aftercare must be made directly to her. She would prefer cash (R 650 per month) or by e - wallet. Her cell phone number is : 064 470 8798.

Baking, Catrobatkidz and weekly Zumba classes are included in monthly fees.

**Banking Details:**

First National Bank  
Account Name: Sharon Porter  
Branch Code: 258055  
Account Number: 62447843378  
Reference: Child's Name

I, ....., Parent of .....

....., have read and acknowledge the above and accept that once my child has enrolled at Montessori Rustenburg Pre-Primary School, I am responsible for the payment of school fees in advance by the 3<sup>rd</sup> day of the month, February to November and that three (3) months written notice be given should you wish to withdraw your child from the school.

I also acknowledge that I have received a copy of the Parents Handbook

Signed:.....

Date:.....