

# Registration Form 2025

## Learner details:

<b>Registration date</b>	
<b>Starting date</b>	
<b>Surname</b>	
<b>Full names</b>	
<b>Preferred name</b>	
<b>Gender</b>	
<b>Date of birth</b>	
<b>ID number</b>	
<b>Residential address</b>	
<b>Postal address</b>	
<b>Parents contact details</b>	<b>Mom:</b>
	<b>Dad:</b>
<b>Home language</b>	
<b>Previous school attended</b>	

Initial: \_\_\_\_\_



**Address:**

260B Jean Ave  
Die Hoewes  
Centurion  
0163

## Medical background:

<b>Chronic/acute medical condition(s)</b>	
<b>Special dietary requests</b>	
<b>Notifiable Medical Conditions (eg COVID19)</b>	<b>Yes/No</b> (if Yes, indicate status)
<b>Allergies</b>	
<b>Is the child's vaccine schedule up to date?</b>	<b>Yes / No</b>
<i>Kindly provide an updated copy of the learner's vaccine schedule</i>	

<b>General practitioner</b>	
<b>Contact details</b>	
<b>Medical aid</b>	
<b>Medical aid number</b>	

### 1. Emergency contact/Next of kin:

<b>Name and Surname</b>	
<b>Relationship</b>	
<b>Contact details</b>	

### 2. Emergency contact/Next of kin:

<b>Name and Surname</b>	
<b>Relationship</b>	
<b>Contact details</b>	

Initial: \_\_\_\_\_



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## Parent details:

	Father	Mother
<b>Surname</b>		
<b>Full names</b>		
<b>ID number</b>		
<b>Occupation</b>		
<b>Employer</b>		
<b>Residential address</b>		
<b>Work address and contact number</b>		
<b>Contact number/s</b>		
<b>Email address</b>		
<b>Marital status</b>		
<b>Religion</b>		

*\*The parent/guardian of the learner hereby selects the address given as its chosen domicilium citandi et executandi address, being the address where it shall accept all notices.*

Please indicate the person responsible for for the account:

-----

Initial: \_\_\_\_\_



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## School fees:

Age group	Fees per month	
3 – 12 months 12 -24 months	R 4050 Full day R 1350 Half day	
2 – 3 Years Gr. RRRR	R 4050 Full day R 1350 Half day	
3 – 4 Years Gr. RRR	R 3700 Full day R 3000 Half day	
4 – 5 Years Gr. RR	R 3700 Full day R 3000 Half day	
5 - 6 Years Gr. R	R 3700 Full day R 3000 Half day	
<b>Sibling discount:</b> (Two children or more)	Half day: 10% off each learner's fee	Full day: 10% off each learner's fee
<b>Re-enrolment</b>	R 750	
<b>Enrolment fee</b>	R 1850	

\*Day visitor fee: R 280 per day

Please indicate the option you would like:

Half day:

Full day:

Monthly Market Day R 60 per month

Yes

No

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# Rules and Regulations:

## Finances and Payment

- The monthly school fees are **payable in advance** on or **before the 1st day of each month**.
- Should the 1st fall on a Saturday, Sunday, or Public Holiday, then payment will be due on the following business day.
- A **penalty fee of R500.00** will be charged for late payment.
- Admission may be denied if school fees are not paid.
- All fees include meals and snacks (for details please refer to our website menu).
- In case of outstanding fees and/or penalties, you will be held liable for any costs incurred. This includes collection fees, legal costs on an attorney/client scale and interest on the outstanding amount.
- The monthly school fees are payable in full every month, free from any form of deductions or set-offs. Should the child not be at school for any reason, the school fees shall remain payable.
- If your child is leaving the school, **ONE MONTH WRITTEN NOTICE** must be given. The full monthly fee will still be charged during this month.
- Unfortunately, we do not take **November** as a notice month, therefore the full fee is payable for December. This implies that should you wish not to pay for December your child will finish at the end of October or, otherwise, as the norm, at the end of December (December fee then paid).

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## General

- It is your responsibility to inform us of any changes in your child's medical condition or dietary requirements to ensure we can provide the best care possible.
- School attendance may only be changed from half day to full day and vice versa once per year.
- For children fetched after 14h00 (half day) and 17h30(full day), an additional fee of R40.00 per 5 minutes late will be payable and will be added to your monthly account.
- Please mark all clothes with your child's name.
- Please notify us of any address or telephone number changes.

## School closure and holidays

Crayon Kids Academy will be open from 06:45 till 17:30 Monday to Friday. No child may be dropped off before 06:45 and all children must be collected by 17:30 in the afternoon. In the event that you are unable to collect your child/children by 17:30, prior arrangements must be made with Crayon Kids Academy. Should no arrangement be in place, a penalty fee of R100.00 shall be charged.

## Protection of personal information

We, as a responsible institution, collect, store, and process personal information in accordance with our privacy notice. By completing this form, and voluntarily providing the information requested therein, you consent to such information being collected, stored, and processed accordingly.

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## Declaration:

I/We \_\_\_\_\_  
parent/guardian(s) of \_\_\_\_\_ hereby declare(s) as  
follows:

I/We hereby acknowledge that I/We have received the general information and rules of Crayon Kids Academy, and I/We agree to comply with the rules set by the school from time to time, and I/We hereby accept the conditions of registrations.

I/We hereby indemnify and hold Crayon Kids Academy, it's teachers and staff harmless for any damages, costs, losses, and/or injuries that may occur while our child/children are under the care and supervision of Crayon Kids Academy. Furthermore, in the event of an injury, I/We hereby grant Crayon Kids Academy, it's staff and teachers, permission to enlist medical assistance at my/our expense.

Consent to publish photographs on the school's publications and/or newsletters:

I **consent** to the use of photographs of my child in school publications, social meida or newsletters. **Initials:** \_\_\_\_\_

I **do not consent** to the use of photographs of my child in school publications, social meidaor newsletters. **Initials:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_  
**Signature**

**Parent/Guardian Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_  
**Signature**

**Initial:** \_\_\_\_\_

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## Please attach the following documents:

- A copy of parents ID
- A copy of learner's birth certificate
- A copy of the learner's updated vaccine schedule
- A copy of the learner's medical aid card/details
- Financial clearance from the previous school

### *For office use only:*

#### Received access cards:

Yes

No

#### Mattress:

Yes       Own

No

#### Stationary pack:

Yes

No

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