

Charis Kids Aftercare

ENROLMENT FORM 2019

LEARNER DETAILS

Name:	_____
Surname:	_____
Date of birth:	_____
Grade:	_____

MEDICAL INFORMATION

Allergies:	_____
Medical conditions:	_____
Prescriptions:	_____
Medical fund:	_____
Membership no:	_____
Name of main member:	_____
Family doctor name:	_____
Telephone no:	_____

PARENTS DETAILS

<u>Father</u>	<u>Mother</u>
Name: _____	Name: _____
Surname: _____	Surname: _____
Cellphone no: _____	Cellphone no: _____
Work telephone no: _____	Work telephone no: _____
Work address: _____	Work address: _____
Residential address: _____	Residential address: _____

EMERGENCY CONTACT DETAILS

Name and surname: _____	Telephone no: _____
Relationship to learner: _____	

We, parents of _____ agree and accept the Terms and Conditions of Charis Kids Aftercare as mentioned in the attached document.

Signed at Pretoria on this _____ day of _____ 20_____

Signature of Father

Signature of Mother

Charis Kids Aftercare

INFORMATION FORM 2019

TERMS AND CONDITIONS

- 1 Aftercare **fees are payable in advance** before the 3rd of every month or arrange for the 15th.
- 2 Aftercare **hours** are from **after school until 17h30**, Mondays to Fridays.
- 3 The Aftercare closes at 17h30 and parents that **arrive late** will pay a **R 30.00 fine**.
- 4 If your child **does not attend** Aftercare due to sickness, full/half day ect. you will **still be liable** for the Aftercare fees.
- 5 There will be **no Aftercare during school holidays** and fees will be calculated accordingly.

FEES 2019

First Term	January	R 760.00	Second Term	April	R 900.00
	February	R 900.00		May	R 900.00
	March	R 500.00		June	R 450.00
		<u>R 2,160.00</u>			<u>R 2,250.00</u>
Third Term	July	R 760.00	Fourth Term	October	R 900.00
	August	R 900.00		November	R 900.00
	September	R 670.00		December	*(see note below)
		<u>R 2,330.00</u>			<u>R 1,800.00</u>
Total for a year:		R 8,540.00		*R220 December fee only applicable if child is still at school.	

ACCOUNT DETAILS

Cash or Mobile Banking:

Bank name: **Capitec Bank**
Account name: **Loraine Heyns**
Branch no: **47 00 10**
Account no: **130 131 7584**
Reference no: **After Care / Child's Name**
Please add R 10 if you make a cash deposit.

Mobile banking - Capitec customer mobile transfer to my banking cell number: 074 846 5871.

Cash fees may also be paid at office or aftercare - receipt will be given.

Internet Transfers:

Bank name: **Capitec Bank**
Account name: **Loraine Heyns**
Branch no: **47 00 10**
Account no: **132 251 1991**
Account type: **Savings Plan**
Reference no: **Child's Name**

Please do not pay Aftercare fees into the school's account.

Kind Regards

Loraine Heyns
084 402 6647