

8 Harmoni Street, Kuilsriver 7580  
Email: [info@learnandleaddaycare.co.za](mailto:info@learnandleaddaycare.co.za)  
Website: [www.learnandleaddaycare.co.za](http://www.learnandleaddaycare.co.za)  
Cell: 0769176426

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## APPLICATION FORM

I hereby request placement of my child for admission to LEARN AND LEAD DAYCARE. \_\_\_\_\_ Month/year

### CHILD'S INFORMATION

Full name and surname \_\_\_\_\_

Date of birth \_\_\_\_\_ Child's gender \_\_\_\_\_

Home Address \_\_\_\_\_

Previous daycare: \_\_\_\_\_ Contact no: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

### PARENTS INFORMATION

Fathers full name and surname: \_\_\_\_\_

Occupation: \_\_\_\_\_

Work address: \_\_\_\_\_

Tell: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

ID no: \_\_\_\_\_ Email: \_\_\_\_\_

Mothers full name and surname: \_\_\_\_\_

Occupation: \_\_\_\_\_

Work address: \_\_\_\_\_

Tell: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

ID no: \_\_\_\_\_ Email: \_\_\_\_\_

Alternative contact number in case of emergency: \_\_\_\_\_

#### CHILDS MEDICAL INFORMATION

Allergies: \_\_\_\_\_

Special needs: \_\_\_\_\_

Medical aid scheme number: \_\_\_\_\_

Details of person responsible for payment of daycare account.

Name and surname: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

ID no: \_\_\_\_\_ Contact no: \_\_\_\_\_

Waiver and indemnity

I \_\_\_\_\_ am responsible for the payment of the account payable on the 3<sup>rd</sup> of every month. Please note that payment on any other date thereafter has to be arranged with the office. Payments are paid in advance at the beginning of the month for every month. A penalty will be added to your account for late payments.

Therefore if you have a problem please notify the office.

This constitutes a legal agreement between you \_\_\_\_\_ and S. Elfeky.

Fees are payable whether or not your child attends daycare. Legal fees in the event where the daycare takes legal steps against the person responsible for paying their outstanding account, you will be held liable for legal fees, interest and collection costs.

**PERMISSION TO PUBLISH IMAGES, VIDEOS AND GENERAL PHOTOS OF LEARNERS.**

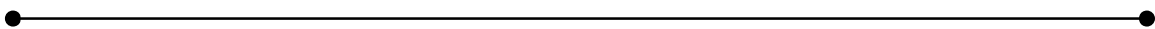
There is a possibility that Learn and Lead Daycare might from time to time publish images, videos of your child on our various platforms. You are hereby informed of this information.

Yes I give Learn and Learn Daycare permission to publish:

SIGNED \_\_\_\_\_

No I do not give permission for images of my child to be used on any of the platforms:

SIGNED \_\_\_\_\_



## CANCELLATION

One month notice is required for the termination of service of daycare.

Learn and Lead Daycare does not accept notices at the end of November month.

Signed on this day \_\_\_\_\_

With completion of the application form please bring along the following:

### R 300 REGISTRATION FEES

- Birth certificate (child)
- Clinic card
- Both parents ID's
- Proof of residence

