



Sugar & Spice

EARLY LEARNING CENTRE



APPLICATION FOR ENROLMENT

Please e-mail completed forms to info@sugarandspiceschool.co.za

SECTION 1: LEARNER'S PERSONAL DETAILS

Surname		Full Names				
Preferred Name		ID No.				
Current Grade		Current Age	MALE		FEMALE	
Home Language		Date of Birth				
Lives with		Cell No.				
HALF DAY		FULL DAY		Date of Admission		
Name of previous School / Playgroup / Day mother						

SECTION 2: LEARNER'S MEDICAL INFORMATION

Previous Serious Illnesses					
Previous Operations					
Family Doctor's Name		Tel.			
Address					
Medical Aid Name		Mem. No.			
Main Member		ID No.			
Options					
Allergies		Medication			

Sugar & Spice Early Learning Centre

Directors: V J Meredith ♥ L Pienaar ♥ D M van der Merwe ♥ J Pienaar



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In a critical medical situation, please bear in mind that there may not be time to refer to the learner's records. Sugar & Spice therefore reserves the right to utilise the medical service that is available to respond the soonest.

It is understood that every effort will be made to contact my spouse, myself or the alternative contact before such action is taken.

The person liable for school payments will be responsible for the payment of such care or treatment.

I hereby agree that a medical practitioner / the medical service available may provide emergency treatment as may be necessary.

SIGNATURE OF PARENT / LEGAL GUARDIAN



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SECTION 3: DETAILS OF FATHER / STEPFATHER / LEGAL GUARDIAN

Surname		Full Names	
Preferred Name		ID No.	
Physical Address		Tel (H)	
		Tel (W)	
		Cell No.	
E-mail address			

SECTION 4: DETAILS OF MOTHER / STEPMOTHER / LEGAL GUARDIAN

Surname		Full Names	
Preferred Name		ID No.	
Physical Address		Tel (H)	
		Tel (W)	
		Cell No.	
E-mail address			

SECTION 5: DETAILS OF AN EMERGENCY CONTACT

Relationship		Full Names	
Surname		ID No.	
Physical Address		Tel (H)	
		Tel (W)	
		Cell No.	
E-mail address			

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SECTION 6: PAYMENT TERMS AND CONDITIONS

- Registration is for 12 (twelve) months.
- Fees are payable monthly in advance on or before the 1st first day of each calendar month.
- Notice of cancellation will only be accepted with 60 (SIXTY) days prior notice.
- No notice of cancellation will be accepted in the months of November and December.
- If any of the school fees are in arrears, or outstanding, the school will be entitled to levy costs on the attorney/client scale in respect of the collection thereof.

You hereby agree that we may:

- Make enquiries about the information you have supplied;
- Make enquiries at any credit bureau while we consider your application and, if your application is successful, we may trace your new address should the school fees be in arrears or you owe us any money (at any stage);
- Supply any details concerning your account to any credit bureau to inform them about both positive and negative payment information regarding your account.

BANK DETAILS:

Bank: STANDARD BANK
Accountholder: J PIENAAR
Account No: 410 511 471
Branch Code: 026509

Name of person liable for the payment _____

SIGNATURE _____

DATE _____

Sugar & Spice Early Learning Centre: Reg No: 2017/216654/07
19 Algoa Road, Milnerton, Cape Town, 7441 | E-mail: info@sugarandspiceschool.co.za
Tel: 083 668 9733