



Immanuel Day Care Centre
 159 Roosmaryn Crescent, Geelhoutpark Extension 6
 Where Little Dreams Begin!

Registration Form

Registration is subject to signing of application form (attach copy of ID), emergency release, field trip permission and the indemnity form.



Please attach child's photo here

CHILD'S INFORMATION

Full Name(s) :

Surname :

Nickname :

ID Number :

Date of Birth : / / Home Phone :

Address Line 1 : Address Line 2 :

Suburb : City :

Province : Postal Code :

PARENT'S INFORMATION (MOTHER)

Full Name(s) :

Surname :

Employer's Name:

Occupation :

Work Address :

Work Phone : Ext :

Home Phone : Cellular Phone :

Address Line 1 : Address Line 2 :

Suburb : City :

Province : Postal Code :

PARENT'S INFORMATION (FATHER)

Full Name(s) :	<input type="text"/>		
Surname :	<input type="text"/>		
Employer's Name:	<input type="text"/>		
Occupation :	<input type="text"/>		
Work Address :	<input type="text"/>	Ext :	<input type="text"/>
Work Phone :	<input type="text"/>	Cellular Phone :	<input type="text"/>
Home Phone :	<input type="text"/>	Address Line 2 :	<input type="text"/>
Address Line 1 :	<input type="text"/>	City :	<input type="text"/>
Suburb :	<input type="text"/>	Postal Code :	<input type="text"/>
Province :	<input type="text"/>		

PARENT'S RELATIONSHIP (PLEASE TICK)

Married :	<input type="checkbox"/>	Living Together :	<input type="checkbox"/>	Divorced :	<input type="checkbox"/>
Separated :	<input type="checkbox"/>	Widowed :	<input type="checkbox"/>	Single :	<input type="checkbox"/>

MEDICAL HISTORY

Please be sure to inform us if your child has any allergies or is taking any specific medication. If you have any medication that needs to be given to your child please mark the bottle with child's name. Hand it to the caregiver in charge with necessary instructions.

EMERGENCY CONTACTS

Primary Emergency Contact (other than parents or guardian)

Name and Surname :	<input type="text"/>		
Relationship to child :	<input type="text"/>		
Home Phone :	<input type="text"/>	Work Phone :	<input type="text"/>
Address Line 1 :	<input type="text"/>	Address Line 2 :	<input type="text"/>
Suburb :	<input type="text"/>	City :	<input type="text"/>
Province :	<input type="text"/>	Postal Code :	<input type="text"/>

Secondary Emergency Contact (other than parents or guardian)

Name and Surname :	<input type="text"/>		
Relationship to child :	<input type="text"/>		
Home Phone :	<input type="text"/>	Work Phone :	<input type="text"/>
Address Line 1 :	<input type="text"/>	Address Line 2 :	<input type="text"/>
Suburb :	<input type="text"/>	City :	<input type="text"/>
Province :	<input type="text"/>	Postal Code :	<input type="text"/>

EMERGENCY INFORMATION

Child's Doctor :	<input type="text"/>	Phone :	<input type="text"/>
Preferred Hospital :	<input type="text"/>	Phone :	<input type="text"/>
Regular Medications :	<input type="text"/>	Medicine allergic to:	<input type="text"/>
Food allergies :	<input type="text"/>	Any other allergies :	<input type="text"/>
Any special health conditions :	<input type="text"/>		

INDEMNITY

In the unlikely and unfortunate event of natural disasters, fires, floods, lighting etc. occurring not be held responsible for any loss suffered as a result.

1. Furthermore,

shall not be held responsible (Financial, legally or otherwise) for any loss of valuable and personal possessions or personal injury resulting from the participation of the child attending any educational exercise, outing, or daily activities of the Crèche.

2. Solely, by permitting attendance of the child to the Crèche, I acknowledge and agree to abide to the abovementioned conditions.

ACCOUNT PAYMENT

I, (Parent/Guardian) agree that I will pay the Crèche account without fail; on or before the due date.

Arrears of 30 days or more will be handed over for collection with all the associated costs (i.e. Attorneys, court etc.)

I (the signatory – Parent/Guardian) understand this is a legally binding document. I have read it and fully understand its contents. All the contents were fully explained to me. I have no objection in signing this contract.

Name & Surname (Mother) :

ID Number :

Signature :

Date :

Name & Surname (Father) :

ID Number :

Signature :

Date :

Persons signing contract is responsible for payment.

(PLEASE ATTACH COPY OF I.D.)

EMERGENCY RELEASE

Consent to Emergency First Aid & Transportation:

I hereby give permission that my child, Name [redacted]

May be given emergency treatment by a staff member of Immanuel Day care Centre. I also give permission for my child to be transported by car/ambulance, to any emergency Centre for treatment, and I agree to hold Immanuel Day care Centre and its employees harmless.

Name & Surname (Mother) : [redacted]

ID Number : [redacted]

Signature : [redacted] Date : [redacted]

Name & Surname (Father) : [redacted]

ID Number : [redacted]

Signature : [redacted] Date : [redacted]

FIELD TRIP PERMISSION

I hereby request that my child, Name: [redacted]

be permitted to participate in fields trips, to the park, or any other activities that would involve taking the child outside of the day care for his/her benefit in attendance at this facility, and agree to hold

[redacted] and its employees harmless.

Name & Surname (Mother) : [redacted]

ID Number : [redacted]

Signature : [redacted] Date : [redacted]

Name & Surname (Father) : [redacted]

ID Number : [redacted]

Signature : [redacted] Date : [redacted]

GRADUATION

Graduation Fee package R [redacted] Including school fees and Meals.

- We provide children with 3 meals per day, breakfast, lunch and Snacks
- Our Uniform: [redacted]
- A 3 (three) months notice is required when you remove your child from the centre.
- We also cater for children with special need, those HIV positive and Aids infected or affected.
- NB NO REFUND OF ANY PAYMENT OR TOILETRIES WILL BE GIVEN AND / OR ANY DISCOUNT

PHOTOGRAPHY & MEDIA CONSENT

I, the undersigned parent/guardian of [redacted]

hereby grant permission to Immanuel Day Care Centre to photograph, record, and use images and/or videos of my child for the purpose of displaying on the school's website, social media pages, newsletters, and any other promotional or educational materials related to the school.

I understand that these images/videos may be used publicly for the purpose of showcasing activities, achievements, and events at Immanuel Day Care Centre. I acknowledge that no personal information (such as full names) will be disclosed alongside the images without additional consent.

I acknowledge that this consent is voluntary and that I may withdraw it at any time by providing written notice to Immanuel Day Care Centre.

By signing below, I confirm that I have read and understood this consent and voluntarily agree to allow the school to use my child's images as described above.

Name & Surname (Mother) :

ID Number :

Signature :

Date :

Name & Surname (Father) :

ID Number :

Signature :

Date :

RULES AND REGULATIONS

1. A registration fee of R200.00 is payable before admission of the child. A school fee is paid monthly.
2. No refund will be payable during the period which the child does not attend the crèche.
3. Your child must be collected from crèche not later than 17h00, unless special arrangements have being made.
4. Should parents wish to remove the child from day care a three months written notice is required.
5. Parents must undertake to attend meetings as requested by the crèche, if unable to attend send a representative.
6. A photocopy of the immunization (clinic card) card and birth certificate must be submitted.
7. Children must be presentable and clean when brought to the day care centre.
8. Parents must report any problem the child may have to the teacher, e.g. refusing feed, unwell at night or over the weekend, doctors order etc.
9. Registration is subject to signing of application form (attach copy of ID) emergency release, field trip permission and the indemnity form.
10. No sick child should be brought to the day care centre.
11. All trips are compulsory even if you are not attending, due to fundraising.
12. Parents must undertake to buy a cake, sweets, juice, chips etc. for the class on their children's birthdays.
13. No child/children are to be dropped at the gate.