

# From Playing to Einstein (Pty) Ltd ECD Centre

Address: 82 Homestead Avenue, Homelake, Randfontein.

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Facebook Page: [From Playing to Einstein ECD Centre](#)

Reg no: 2021/802484/07      Owner/Principal: Jaqueline Swanepoel

Banking Details: Mercantile Bank      Acc. Name: FPTE Ecd Centre Pty Ltd      Ref: Acc no. as per statement.  
Acc No: 1050944194,      Acc Type: Cheque      Branch Code: 450105

## 2023 - ENROLLMENT APPLICATION FORM

<b>Name of Learner:</b>	
<b>Age:</b>	
<b>Year Applying for:</b>	
<b>Application for:</b>	<b>2023</b>

Please  
Attach  
Photo  
Here

**Please read the Application Information and Requirements below before completion:**

- Please print in capitals and complete **ALL** sections, even if there is repetition. The supplying of false information will invalidate this application. Please supply a **physical address** as well as a **postal address** if applicable.
- **The application must be accompanied by copies** of the following documents: Identity documents of **both** parents and/or account payers, Copy of child birth certificate, Copy of previous school report (if applicable), one ID size photograph of your child attached in the space provided, Copy of medical aid card and a Copy of the child's immunisation card.
- **REGISTRATION FEE:** Should your application be successful; you will be required to indicate your intention to take up the place offered to your child by the payment of a **non-refundable registration fee of R550 for 2023**. This fee is payable **when you child attends school the first day**. No exceptions will be made. Please do not ask for extension as we do not operate a charity organisation but a business that based on school fees.
- **SCHOOL FEES:** School fees are payable in advance and no later than the **last day of every month**. Late payments will be **fined R200** if you pay later than the 1<sup>st</sup> no exceptions will be made. If no payment is received by the **4<sup>th</sup> of the month your services will be suspended**, and your account will be handed over to our legal department for recovery of all outstanding monies.
- **The childcare sitting runs from 06:00 - 18:00 and will only be staffed between these hours and a penalty fee of R200 will be payable immediately on pick up for late collections. Please take note that we are closed on Public Holiday's.**
- We are open with school holidays but we all need a rest as well so we will be **closed on Public Holidays**. We will be on the Government School Calendar which means when they are closing for school holiday's we will be open except in the December school holiday's, we will close with the Government schools.
- By signing this application, you are binding yourself to all the rules, as attached, and as amended from time to time.
- In the case of a divorce, irrespective of the divorce agreement, both parents will be held responsible for the fees and must, therefore, both sign the application form.
- If you have any objections to compulsory participation in sports, activities, outings or any religious instruction, these must be made **in writing** and attached to this application for consideration.
- **NO INCOMPLETE APPLICATION FORMS WILL BE ACCEPTED.**

<b>FOR OFFICE USE ONLY:</b>		<b>ACCEPTED:</b>	<b>YES</b>	<b>NO</b>
<b>DOCUMENTS:</b>		<b>DATE OF ACCEPTANCE</b>		
Child's Report & Birth Cert:		<b>DISCHARGED DATE:</b>		
Copies of Both Parents' I.D:		<b>APPLIED FOR:</b>		
Copy of IM Card:		<b>Application Fee:</b>		
Copy of Medical Card:		<b>Receipt No:</b>		
Copy of Proof of Residence:		<b>Date Received:</b>		
<b>DETAILS OF LEARNER:</b>				
<b>SURNAME:</b>		<b>Initials:</b>		
First names: (As shown on birth certificate)				
Called name, if different to first name above:				
<b>ADDRESS AND CONTACT DETAILS OF LEARNER:</b>				
Physical address:				
	Postal code:			
Cellphone no:				
<b>OTHER PERSONAL DETAILS OF LEARNER:</b>				
Identity number:		Birth date:		
Home language:		Nationality:		
Date of arrival in SA:		SA Citizenship:	Yes	No
Religion:				
Name of current school:				
Name of previous school:		Year:		
Reason for leaving:		Year:		
<b>Please list the activities in which your child is currently involved and any noteworthy achievements:</b>				
<b>NOTE: Sport is a compulsory component of the curriculum at F.P.T.E ECD Centre and children are only excused for valid medical reasons.</b>				
Sporting Activities:				
Cultural Activities:				
Religious Activities:				
Do you have any objections to your child participating in religious activities at school?			<b>YES</b>	<b>NO</b>
<b>If YES, please furnish reasons:</b>				

MEDICAL DETAILS OF LEARNER					
Doctor's Name:					
Practice Phone no:					
Cell no:					
<b>EMERGENCY CONTACT (other than parents):</b>					
Name:		Tel. no:			
Relationship to learner:		Cell no:			
Physical Address:					
MEDICAL HISTORY OF LEARNER					
Allergies:					
Routine Medication:					
Recent Injuries:					
Previous Operations:					
Existing Medical Problems:					
<b>Please indicate any appropriate information in the following areas:</b>					
<b>***Learning disabilities:</b>					
<b>***Social disabilities:</b>					
<b>** *Please take note that if your child does need special attention of have learning disabilities if would be in the child's best interest to place him in a school that provide the necessary special attention and stimulation that he/she requires. We do not have teachers that are qualified to assist children with learning disabilities.</b>					
MEDICAL AID DETAILS					
Member's Name:		Medical Aid: eg Fedhealth			
Membership no:		Specific Plan: eg Maxima			
CORRESPONDENCE					
Please indicate who is to receive the school report.	Father	Mother	Guardian		
Please indicate who is to receive the fees account.	Father	Mother	Guardian		
WHO DOES THE LEARNER RESIDE WITH?					
Father	Mother	Guardian	Grandparent	Sponsor	Other

DETAILS OF FATHER					
Surname:				Title:	
First Names:					
Identity no:			e-mail:		
Marital status:	Married:		Divorced:		
	Single parent:		Re-married:		
If re-married, complete stepmother's details on page 5					
Home phone no:			Cell no:		
Business number:			Fax no:		
Physical address:				Postal code:	
Postal address: If different to above:					
Name of Employer:	(If parent is a teacher, please state the name of the school)				
Occupation:					

DETAILS OF MOTHER					
Surname:				Title:	
First Names:					
Identity no:			e-mail:		
Marital status:	Married:		Divorced:		
	Single parent:		Re-married:		
If re-married, complete stepfather's details on page 5					
Home phone no:			Cell no:		
Business number:			Fax no:		
Physical address:				Postal code:	
Postal address: If different to above:					
Name of Employer:	(If parent is a teacher, please state the name of the school)				
Occupation:					

HOW MARRIED?				
Ante-Nuptial Contract	Community of Property	Customary	Hindu/Moslem	Other

<b>DETAILS OF STEPFATHER/STEPMOTHER</b>			
Surname:			Title:
First Names:			
Identity no:		e-mail:	
Home phone no:		Cell no:	
Business number:		Fax no:	
Physical address:			
		Postal code:	
Postal address: If different to above:			
Name of Employer:	(If stepparent is a teacher, please state the name of the school)		
Occupation:			

<b>DETAILS OF GUARDIAN/SPONSOR</b>			
Surname:			
First Names:			
Identity no:		e-mail:	
Marital status:	Married:		Divorced:
	Single parent:		Re-married:
Home phone no:		Cell no:	
Business number:		Fax no:	
Physical address:			
		Postal code:	
Postal address: If different to above:			
Name of Employer:	(If guardian/sponsor is a teacher, please state the name of the school)		
Occupation:			

<b>RELATIONSHIP TO LEARNER:</b>			
Guardian	Grandparent	Foster Parent	Other:

SCHOOL FEES			
Who will be responsible for the school and boarding fees?	Father	Mother	Guardian
	Foster Parent	Grandparent	Other:
DETAILS OF PAYER			
Surname:			
First Names:			
Identity no:		e-mail:	
Home phone no:		Cell no:	
Business number:		Fax no:	
Physical address:			Postal code:
Postal address: If different to above:			
Name of Employer:			
Occupation:			
<b>**When signing this part, you as the PAYER acknowledge paying all fees that are due every month on or before the first of every month no exceptions made as stipulated below;</b>			
<b>School Fees due every month before the 1<sup>st</sup>:</b> _____			
Signature of Payer:			
Name & Surname of Signature Holder:			

**ADMISSION ACCEPTANCE:**

- Completion of this application is not a guarantee that your child will be accepted at F.P.T.E ECD Centre.
- PLEASE NOTE: The operating hours are:  
From 06:00 - 18:00 currently.  
We are open with school holidays but we all need a rest as well so we will be closed on Public Holidays. We will be on the Government School Calendar which means when they are closing for school holidays we will be open except in the December school holidays, we will close with the Government schools. We are also closed on public holidays.
- You will be informed of the school's decision once all applications have been processed.
- A Non-refundable registration fee will be payable on your acceptance and the first month's school fees will be payable immediately in full before the child attends the first day. No exceptions will be made. Please do not ask for extension as we do not operate a charity organization but a business that based on school fees.
- If accepted, one (1) term's notice is due should you wish to transfer your child to another school (a full term's fees will be charged if notice is not given and all outstanding fees will be handed over to our Legal Department for collection).
- **It's you as the Parents responsibility to see that your child gets to and from school. If for any reason your child does not attend school, you cannot deduct any monies from the next month's school fees. You pay for a month; you need to make sure your child attends school every day you have paid for it. With regards to Government School holidays, the Pre-school will be open and if you decide to keep your child home during the school holidays you must still pay for that month whether he/she attends. School fees are payable 12 months of the year in advance and nothing less even with December and January being shorter months. Please make sure your child attends school.**

**SCHOOL FEE DECLARATION**

I/We the undersigned, parent(s)/guardian(s) of the applicant:

\_\_\_\_\_

FULL NAMES

do confirm and declare the following:

1. I/We are aware of the school fee obligation at F.P.T.E ECD Centre and that the obligation to pay school fees rests with me/us.
2. I/We acknowledge that the school fees for **2023** are as stated below and recognize that the school fees will be increased annually during the period of my/our child/children's career at F.P.T.E ECD Centre. No exceptions will be made. Please do not ask for extension as we do not operate a charity organization but a business that based on school fees.

Non-refundable registration fee R550 for 2023 (1 x Branded T-Shirt included) is payable before the little one attends school for the first time. 2023 - Babies:

3 months to 1 year:

Half day -	R2400.00	-	06:00 – 13:00
Full day -	R2600.00	-	06:00 – 18:00

2023 - Toddlers including Gr.

R: 1 year to 6 years:

Half day -	R1600.00	-	06:00 – 13:00
Full day -	R1900.00	-	06:00 – 18:00

Aftercare for Primary and High school kids - 2023:

Half day excluding morning care	-	R900.00
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\*\*\*Please take note no transport available, own transport needed\*\*\*

**NB! Please note that a non-refundable registration fee R550 for 2023 is payable before the little one attends school for the first time.**

School fees are payable in advance and no later than the **1<sup>st</sup> of every month**. Late payments will be **fined R200** if you pay later than the **1<sup>st</sup>** no exceptions will be made. Discount of R150 can be claimed only if school fees are paid **before** the **1<sup>st</sup>** of every month.

3. I/We declare that I/we are financially able to fulfil the school fee obligation and will comply with the procedures of F.P.T.E ECD Centre in the payment of the said school fees. **(Please attach proof of income)**

This done and signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
FATHER / GUARDIAN

\_\_\_\_\_  
MOTHER / GUARDIAN

\_\_\_\_\_  
JAQUELINE SWANEPOEL  
OWNER/PRINCIPAL

\_\_\_\_\_  
WITNESS NAME AND SIGNATURE

**DECLARATION BY PARENT/GUARDIAN:**

- I/We declare that all particulars furnished by me/us on this form are true and correct and accept responsibility for any errors and omissions.
- I/We hereby certify that I/we have legal custody and/or guardianship in respect of the abovementioned learner.
- Whilst involved in school activities, outings or any other form of activities, I/we authorize the Principal (or appointed staff member) to act *in loco parentis*, including granting consent for medical treatment in the case of an emergency, taking my child / children to hospital at my own expense; I/We the undersigned understands that I/We will be liable for all accounts payable once all reasonable efforts to contact the learner's parents have been made.
- I/We hereby agree to:
  - Although we endeavor to keep your child as safe and healthy as possible, F.P.T.E Pre-school does not accept any responsibility/liability for any illness/injuries, accidents or theft of personal belongings of any kind whilst the child is under our supervision. Ensure that his personal belongings are adequately insured and labeled.
  - **understands that the childcare sitting runs from 06:00 to 18:00 and will only be staffed between these hours and a penalty fee of R200 will be payable for late pick up's immediately!**
  - acknowledge the authority of the Principal, the teachers and student leaders.
  - accept responsibility for our child's/children's transport to and from School.
  - reimburse the School for any damages to school property that may be caused by the learner.
  - jointly and severally undertake to pay the stipulated school fees as stated above with **R150.00 discount** if paid before the 1<sup>st</sup> of every month for **12 months of the year** and a **NON REFUNDABLE Registration Fee of R 550.00** before my child attends the first day of school; understand the following:
    - (a) The school reserve the right to alter these fees, with provision that a 10 (ten) day period is given.
    - (b) Fees are due and payable on the **1st (first)** day of each month from **1<sup>st</sup> January to 1<sup>st</sup> December (12 months)**. The annual compulsory registration fee must be paid in the first week of the New Year. If not received within the first week of the New Year, a penalty fee will be added to your account.
    - (c) If payment is not received by the 1<sup>st</sup> of each month in advance; a Penalty Fee of **R200** will be charged, **NO exceptions to this rule will be made, the school reserves the right to charge interest on all overdue accounts at the rate of 25%**. If school fees is paid before the 1<sup>st</sup> of the month, **a R150 discount** will be given as stated above however, if no payment is received by the 4<sup>th</sup> the school reserves the right to terminate all services rendered to you and to hand your account over to our Legal Department. **NO School Fees, NO Service. No exceptions will be made. Please do not ask for extension as we do not operate a charity organization but a business that is based on school fees.**
    - (d) The parties to this application undertake to pay all legal costs, including attorney/client fees and collection costs incurred by the school in the event of the school having to take legal action for the recovery of school fees.
    - (e) I/We undertake to notify the Principal, in writing, in the event of my child leaving the school at least one month in advance. In addition, I/We will be liable for 1 month's notice fees if I/We do not inform the School 1 month in advance. All outstanding fees not settled on the last day that your child attends school will be handed over.
    - (f) **NO REFUNDS / DISCOUNTS / EXCEPTIONS** will be **ALLOWED** in the event that your child/children are absent from school due to **Force Majeure as well as government school holidays, public holidays, illness, vacations and Easer and December closures. Monthly set fees as above will still be payable in FULL.**
- Ensure that my child attends school regularly and, should my child be absent from school for any reason, inform the school of that in writing.
- I/We understand that the School reserves the right to verify all information supplied herein with the necessary institutions. In the event of fraudulent documents and/or information being supplied, the School reserves the right to lay criminal charges of fraud against any of the parties to this application.
- I/We accept full responsibility for immunizing our child/children against contagious diseases and normal infections, and shall produce proof thereof if required to do so; I contagious diseases to occur I/We understands that our child may not attend school until fit to do so with consent from doctor.
- This commitment in its entirety will be valid from the day on which it is signed by the parents or guardian to the day on which the learner officially leaves the School. The Governing Body reserves the right to reconsider the admittance of the learner to the School.
- **I/We hereby give authorization to F.P.T.E Preschool to publish photos of my child/children on social media, website and marketing material. If NOT, please inform the school and deleted this line. Thank you.**
- I/We declare that I/we am/are entitled to sign this document and shall be bound hereto both as parent/guardian, and in my/our personal capacity.
- The signatory hereto chooses *domicillium citandi et executandi* (official address) as: (please attaché proof of residence)

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
FATHER / GUARDIAN

\_\_\_\_\_  
MOTHER / GUARDIAN

\_\_\_\_\_  
JAQUELINE SWANEPOEL  
OWNER/PRINCIPAL

\_\_\_\_\_  
WITNESS NAME AND SIGNATURE