



ENROLMENT FORM – CONTRACT

The Child's information

Name					
Surname					
Date of Birth		Age			
Home Language					
Religion					
Gender					
Residential address					
Allergies					
Special notes					
Starting date					

Number of children in the family:	1	2	3	4	5	6
Age:						

Mother / Legal Guardian's Details

Name					
Surname					
Identity Number					
Marital Status					
Residential address (if different to child's address).					
Email address					
Cell No					
Occupation					

Employer's Name		Tel no:	
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Are you the biological parent of the child?	Yes		No	
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Father / Legal Guardian's Details

Name	
Surname	
Identity Number	
Marital Status	

Residential address (if different to child's address).				
Email address				
Cell No				
Occupation				
Employer's Name		Tel no:		
Are you the biological parent of the child?	Yes		No	

Does one parent have legal custody of the child? If yes please write down the parent with legal Custody:

EMERGENCY CONTACT

Name			
Telephone no		Cell No	
Email			
Relationship			

PERSON/S RESPONSIBLE FOR PICK-UP

Name			
Telephone no		Cell No	
Email			
Relationship			

HEALTH QUESTIONNAIRE

Please check the following relevant boxes:

Description	Yes	No
Chicken pox		
Diphtheria		

Typhoid		
Measles		
Epileptic Fits		
Tuberculosis		
German measles		
Mumps		
Scarlet fever		
Whooping cough		
Convulsions		
Hepatitis B		
List other illnesses not mentioned above:		
Is your child presently on medication?		
If yes for any of the above mentioned, please supply details:		
Has your child any problems with:	Yes	No
Hearing?		
Sight?		
Speech?		
Does your child show any sign of nervousness?		
Has your child ever been referred to a(n):	Yes	No
Occupational Therapist?		
Speech Therapist?		
If yes for any of the above mentioned, please supply details:		

Family doctor's name (if applicable).		Contact no:	
Medical Aid name:		Medical aid no:	
Do we have your permission to call any local doctor or emergency service to attend to any emergency regarding your child:	Yes	No	

PERSON/S RESPONSIBLE FOR PAYMENT	
Name	
Surname	
Identity Number	

Fees 2025

<u>Registration fee R900</u>	3 Months – 18 Months	18 Months – 6 Years
Half day	R3100	R2850
Full day	R3600	R3300

I agree to payment option of _____ monthly.

Declaration by parent(S) / Guardian:

I, _____, declare that the information herein as supplied by me/us is correct and to the best of my /our knowledge.

- Agree to abide by Little Elite Kids rules as in Annexure A of this document.
- Agree to pay a non-refundable enrolment fee of R900.00 on acceptance of this enrolment at Little Elite Kids
- Agree to pay the monthly fees in full even if my/our child is away on holiday or absent or for any other reason.
- Am aware that the school will be closed every year from a date in December to a date in January of the following year (exact dates to be announced not later than 1 November of each year).
- Agree to pay the monthly fees in full for the months of December and January in order to retain enrolment.
- Agree to pay legal and collection fees incurred on overdue accounts.
- Agree that any information in this application may be used and disclosed to third parties if required for the well-being of my/our child by the Department of Health.
- Understand that I/we may inspect any information to any emergency regarding my/our child and I/we undertake to meet all expenses incurred.
- Are aware that my enrolment can be cancelled by Little Elite Kids with 7 days' notice and that no reason for such action need to be supplied by Little Elite Kids.
- We am/are aware that parents are jointly and severally liable for the payment of the monthly fees as agreed herein.
- Practical activities will be charged for separately.
- Accept that the monthly fee is payable in advance before the 1th day of each month.
- Agree to give one calendars months' notice in writing if the service as indicated is no longer required (Notice to be given on the first day of the month for that Month). Or pay one month's fee in lieu of notice.

This implies that:

- Notice to terminate the service must reach the office by no later than the first working day of the last month that the child will attend Little Elite Kids.
- Notice to terminate must be in writing and that verbal notice will not be acceptable in terms of my agreement signed with the preschool.
- I/we agree to pay the monthly fees in full even if my/our child is away on holiday or absent for any other reason.
- Consent & Indemnity: do hereby give my/our consent that my/our child as mentioned above may take part in all class room and playground activities.
- Little Elite Kids does not accept responsibility for any medical expenses.

- I/we accept that all precautions will be taken for the safety and wellbeing of my/our child.

Signed at _____ on the _____ of _____ 20____

Signature of Parents

Mother full name: _____ Signature _____

Father full name: _____ Signature _____

Annexure A

Rules and conditions of enrolment regarding Little Elite Kids Preschool.

This forms part of the enrolment contract.

- School Hours: Monday-Friday: 06h00-17h30. Aftercare provided until 18h00 at additional cost.
- Parents collecting their children after the time agreed per enrolment must get a message to Little Elite Kids informing us as to why you are late.
- The centre will then arrange the child supervised by a Teacher/Assistant at an additional minimum fee of R50.00 for the first half hour or part thereof and R100.00 per hour or part thereof for any additional time.
- Parents with any query or request regarding their children enrolled at Little Elite Kids must contact the owner without delay.
- Breakfast is served between 08h00 and 08h30. ~~S~~Snack time will commence at 10h00 Lunch is served between 11h45 and 12h45.
- Late snack time will commence at 15h00
- All fees are payable no later than the 4th working day of each month
- It is agreed between Little Elite Kids and yourself that a penalty of 10% of the monthly fee will become payable and be charged to your account for every month that the monthly fee is not received in full by the 4th working day.
- When applicable parents must fill out the medication chart stipulating dosages and the time when medication is to be administered, Medication containers are to be clearly labelled indicating the content and the name of your child. No medicine will be administered unless the medicine chart has been completed by the parent.
- All possible precautions will be taken to prevent any loss or damage to clothing. However, Little Elite Kids does not accept responsibility if loss or damage to clothing does occur.
- Clothing must be marked clearly.
- Fees are based monthly from January to December.

Signed at _____ on the _____ of _____ 20____

Signature of Parents

Mother full name: _____ Signature _____

Father full name: _____ Signature _____

Protection Of Personal Information Notice (POPI)

The personal information Protection Act (POPI) requires us to inform you how we process and disclose any personal information we obtain from you. We are committed to protecting your privacy and will ensure that your personal information is used appropriately, transparently and in accordance with applicable law. This privacy policy applies to all Little Elite Kids Preschool Media (including our website) and governs data collection, storage and use.

1. What information we collect:

Little Elite Kids collect personally identifiable information such as:

- Your identity number
- Information regarding your child enrolled with us
- Email address
- Name and surname
- Home or work address and cell phone number
- Medical history of your child
- Previous schools your child attended
- Logging in regarding your learners' siblings
- Medical aid information
- Age of your child as well as yours
- Gender of your child
- Home language
- Marriage status
- Alternative contact person
- It is to provide the best possible care and education to your child. Such logging with help the teacher assess and assists your child with the correct amount of compassion and insight.

2. How we use your information:

We will only use your personal information for the purpose for which it was collected and agreed with you. This may include the following:

- The processing of your documentation regarding the application for a position of your child at our school.
- Carrying our credit reference searches or verification
- Processing payments for school fees
- Confirm and verify your identity for security purposes
- Audit and record keeping requirements
- The provision of our services to you and your child
- Announcements of birthdays/date of birth and cell phone numbers for our staff members and establishment of class WhatsApp groups

3. Disclosure of your information:

We may disclose your personal information to our staff for educational purposes. We may also disclose your personal information where it is applicable legislation by the law or industry codes or where it may be necessary to protect our rights.

4. Security of your information:

The POPI Act that we adequately protect is the personal information we hold to prevent unauthorized access and use of personal information. We will constantly review our security controls and processes to ensure that your personal information is secure. If we need to transfer your personal information to anyone for any reason, being we will ensure that any part to whom we transfer your personal information is at the same level of protection of personal information as is required of us.

5. Your rights to access and correct your personal information:

You have the right to access all personal information that we have about you. You also have the right to ask us to update, correct or delete your personal information. We will take all reasonable steps to confirm your identity before providing details of your personal information or making changes to your personal information

Photo consent:

Little Elite Kids Preschool, allowed to share photos and videos on their social media pages (Instagram, facebook)

Yes No

You can contact us at the number or email addresses listed below to request information.

Owner/Principal	Melissa Herbst
Telephone number	074 033 2859
Address	89 14 th Avenue Northcliff, Randburg
Email Address	Info@littleelitekids.co.za

Parents Signature

Date

PLEASE SUPPLY

Childbirth certificate

Updated clinic card

Mother / guardian: ID document/passport

Father / guardian: ID document/passport

Medical aid card

Completed enrolment forms