

Compensation Station Road Ballito Drive  
**Email:** admin@beachesprimary.co.za  
**Contact:** 076 777 2625 - Robyn Knapp  
**Website:** www.beachesprimary.co.za  
**EMIS NO:** 500504717



## TERMS & CONDITIONS

### 1. Responsibility for Textbooks and Stationery

Textbooks, exercise books and other stationery will be the parent's responsibility. Textbooks for the senior phase are available to rent. Please speak to the form teacher of that grade if you'd like to rent them from the school. Stationery lists for each grade can be downloaded from our website ([www.beachesprimary.co.za](http://www.beachesprimary.co.za))

### 2. Ordering Uniforms

Uniforms must be ordered directly from the supplier. Contact details can be found on our website.

### 3. Payment Options and Consequences

#### FEES ARE PAYABLE IN ADVANCE AS FOLLOWS:

**OPTION 1** Per annum payable in advance

**OPTION 2** Per month in 12 equal payments on the 1st of every month including December.

- Banking details displayed on this document are to be used for SCHOOL FEE payments ONLY.
- I/we accept that any failure to pay school fees timeously will result in the suspension of my child followed by legal action with cost incurred.
- I/we accept that if the school allows me/us any form of extended payment and I/we default and fail to pay any single instalments by the due date, then the whole amount that's outstanding will become immediately due and payable.
- I/We authorize the school to do a credit bureaux search on me/us and in the event of any school fees due by me/us not being paid, I/we authorize the school to inform any relevant credit bureaux and have my/our name listed with them.
- Removing your child from the school will require ONE full terms notice. I/we accept that if my/our child the child leaves before the notice period is completed the fees for that period still applies and will be payable.
- I/We choose the residential address and contact details contained in the this document as my/our chosen legal domicile for all legal notices and processes until I/we advise the school in writing of my/our new address or contact details, which will then become our new legal domicile.
- In the event that we/I am not the natural parent and/or guardian of the child/children, then I/we accept responsibility of the parent/s.

**I/We accept the terms and conditions mentioned above:**

**Parent/Guardian 1**

Name:

Signature:

Date:

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**Parent/Guardian 2**

Name:

Signature:

Date:

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# ENROLMENT FORM

DOCUMENTS TO BE ATTACHED WITH ENROLMENT FORM	TICK
Birth Certificate	
Certified Copy of Vaccination Record	
Copy of Child's Latest Report if enrolling for the start of the academic year (If enrolling mid-year then copies of all reports from previous school attended within the same year)	
Copy of Professional Assessment Reports	
Copy of Both Parents Id's/Passports	
Transfer Card From Previous School	
Study Permit (If Not A South African Citizen)	
Financial Clearance Form (Download From Website)	
Admin Fee	

<b>FOR OFFICE USE ONLY:</b>	
Student Admin Number	
Grade Applied For	
Year Applied For	
Enrolment Date	
Sibling Applying (Yes/No)	

<b>BANKING DETAILS:</b>	
Bank	ABSA
Name	The Beaches Primary
Account Number	410 705 1081
Account Type	Cheque
Branch Code	632005
Payment Reference	Child's Name & Grade



NB: FORM TO BE COMPLETED BY PARENT OR GUARDIAN (INDICATE WITH A TICK WHERE APPROPRIATE) [✓]

**LEARNER'S PARTICULARS : REGISTRATION**

SECTION A: DETAILS OF LEARNER		GRADE APPLIED FOR	
1	FIRST NAME(S):		
2	SURNAME:		
3	GENDER:	M	F
4	DATE OF BIRTH:	(CCYY/MM/DD)	
5	LEARNER'S ID No.:		
6	POPULATION GROUP	ASIAN	BLACK AFRICAN
7	HOME LANGUAGE:	ENGLISH	ISIZULU
8	HOME TEL. No.:		
9	EMERGENCY No.:		
10	POSTAL ADDRESS		
11	RESIDENTIAL ADDRESS:		
12	NUMBER OF CHILDREN IN THE FAMILY		
13	RELIGION	AFRICAN	CHRISTIAN
14	DISABILITY (IF ANY)		
<b>SOCIAL GRANTS</b>			
15	TYPE OF GRANT	CHILD SUPPORT	FOSTER CARE
	GRANT NUMBER	MAINTENANCE	CARE DEPENDENCY

**SECTION B: DETAILS OF PARENT / GUARDIAN**

16 DECEASED PARENTS:		MOTHER DECEASED	FATHER DECEASED	BOTH DECEASED	NEITHER DECEASED
<b>DETAILS OF MOTHER</b>					
17	SURNAME & NAME				
	ID. No.:				
	OCCUPATION				
	PHYSICAL ADDRESS				
	POSTAL ADDRESS				
	WORK ADDRESS				
	WORK TEL. No.:				
	HOME TEL. No.:				
	CELL No.:				
<b>DETAILS OF FATHER</b>					
18	SURNAME & NAME				
	ID. No.:				
	OCCUPATION				
	PHYSICAL ADDRESS				
	POSTAL ADDRESS				
	WORK ADDRESS				
	WORK TEL. No.:				
	HOME TEL. No.:				
	CELL No.:				
<b>DETAILS OF GUARDIAN</b>					
19	SURNAME & NAME				
	ID. No.:				
	OCCUPATION				
	PHYSICAL ADDRESS				
	POSTAL ADDRESS				
	WORK ADDRESS				
	WORK TEL. No.:				
	HOME TEL. No.:				
	CELL No.:				
<b>E-MAIL ADDRESS:</b>					



# POPIA CONSENT FORM

As prescribed by The Protection of Personal Information (POPI) Act No.4 of 2013, The Beaches Primary is committed to ensuring the confidentiality of all personal information provided to us. All information/data received will be stored with the necessary security standards in place. This information/data will not be shared with unauthorised persons and will be processed lawfully within the confines of the school administration.

By signing below, you acknowledge that The Beaches Primary has collected, processed and stored information provided by you and consent to this information being used by teaching, administrative and financial staff in the following ways:

1. For legitimate business purposes, including providing a service and/or goods to the parent; and child
2. To consider the parent's application for credit facilities
3. To conclude and/or enforce any agreements with the parent
4. To establish a data base of vetted purchasers
5. Complying with any laws that may be relevant to the business relationship

Furthermore, you agree to the school making use of photographs or other images and recordings of your child in the following ways:

1. The school communicator showing learners involved in school activities,
2. School social media or the school website,
3. Brochures for marketing purposes,
4. Newspapers, magazines, newsletters etc. To recognise achievements.

You reserve the right to request the removal of any images/recordings at any time where reasonably possible.

Kindly circle your preference below:

YES / NO – I hereby give / do not give my consent to the above

## LEARNER PROFILE RELEASE AND FINANCIAL CLEARANCE - PARENT CONSENT FORM (POPIA)

Due to the Protection of Personal Information Act (POPIA), you are required to sign below granting permission/consent for The Beaches Primary to request a learner profile and any other relevant information from your child's previous school (Financial Clearance/Fee History/Financial Statement) as part of our enrolment

process (This could affect the acceptance of admission) and to provide such information to the next school, should your child leave the school for any reason.

Please note, it is a legal requirement for your new school to request the learner profile from the previous school- A learner profile holds information gathered throughout a learner's school career, such as: Academic marks and progress, teacher comments, learner Identity Document, skills, strengths, interests, potential barriers to learning and support required; Any professional reports (e.g. Educational Psychology Report; Occupational Therapy; Speech Therapy etc.) provided by parents to the school are also included.

Kindly circle your preference below:

YES / NO – request the Learner Profile from the previous school

YES / NO – request financial clearance from previous school

YES / NO – send the Learner Profile to the new school and/or financial clearance

NAME AND SURNAME OF LEARNER/CHILD		
I.D. NO. OF LEARNER/CHILD		
NAME AND SURNAME OF PARENT		
SIGNATURE OF PARENT	DATE	

# FINANCIAL CLEARANCE FORM

Please hand this to your school head or Bursar for completion and signature, and return it together with your Application form

Name of pupil: \_\_\_\_\_

Name of person/s responsible for fee payment: \_\_\_\_\_

ID No. of person responsible for fee payment \_\_\_\_\_

Name of school where pupil is currently enrolled: \_\_\_\_\_

Annual fees for \_\_\_\_\_ (year) R \_\_\_\_\_

Fees paid to date R \_\_\_\_\_

Fees outstanding R \_\_\_\_\_

Comment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This is to certify that the above person has paid the school fees as indicated.

\_\_\_\_\_

Signature of Head/Bursar

\_\_\_\_\_

Date