



KIMBERLEY KIDS CONSORTIUM PTY (Ltd):

19 Klisser Road, Hadison Park,
Kimberley, Northern Cape, 8301
082 828 2167
kbykids2003@gmail.com
www.kimberleykids.co.za
Reg no: 2022/495975/07

APPLICATION FOR ENROLMENT 2026

Commencement date: _____

Date of birth of child: _____ day _____ month _____ year Age: _____ years.

Kleinkind:	12:30 no lunch <input type="checkbox"/>	14:30 with lunch <input type="checkbox"/>	full day <input type="checkbox"/>	Aftercare Gr RR <input type="checkbox"/>
Clever Kids:	12:30 no lunch <input type="checkbox"/>	14:30 with lunch <input type="checkbox"/>	full day <input type="checkbox"/>	Aftercare for Staats learners <input type="checkbox"/>
Super Cool:	12:30 no lunch <input type="checkbox"/>	14:30 with lunch <input type="checkbox"/>	full day <input type="checkbox"/>	Adaptive Learning Class <input type="checkbox"/>
Tehilla:	Nasorg Gr R – 7 <input type="checkbox"/>	Atalia: Gr R – 7 <input type="checkbox"/>	Atalia: Aftercare <input type="checkbox"/>	

Child:

Full name and surname:
First name:
Home address:
Medical aid details:

Mother:

Name and Surname:
Occupation and employer:
Tel: (w)
Cell:
ID Number:
E-mail:

Father:

Name and surname:
Occupation and employer:
Tel: (w)
Cell:
ID Number:
E-mail:

Reference of a friend/family member not living at the same address as you:

Name & surname: _____ Relationship: _____ Tel: _____



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Family Physician: _____ Tel: _____

Reference of a friend/family member not living at the same address as you:

Name and surname: _____

Relationship: _____ Tel: _____

Who will fetch the child from the centre?

If someone else fetches your child, you must please arrange in advance in writing or by SMS.

Your child's place in the family (e.g. firstborn):

Other siblings: (Name and age)

1. _____ 2. _____

3. _____ 4. _____

Allergies / medical conditions:

Anything else I should know about your child or something that you would like to bring to our attention:

Things which I do not like in an aftercare centre / development centre:

I would like to see the following in place in an aftercare / development centre:



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I have read and understand the following:

	Copy of child's birth certificate to be supplied with the application.
	Payments are payable strictly in advance by the 2nd of each month.
	One month's notice must be given for a child who intends to leave the centre, and fees are payable even if the child does not attend during the notice month.
	On two months arrears we will suspend the service until payments are settled.
	Late payments will be liable for a fine of R30 to cover administrative costs. Arrear accounts are handed over.
	November & December are NOT notice months and are fully payable whether your child is on holiday or not. This is a legal 12-month contract.
	I understand and commit to properly read all the guidelines that will be provided to me once I paid my R400 registration fee.
	As a mother, I will familiarize myself with the medication administration law as determined by the Department.
	CleverKids 06:45 - 12:30 @ R1860 p/m (specialist schooling, small classes, occupational therapy groups, no lunch)
	CleverKids 06:45 - 14:30 @ R2160 p/m (all of the above and includes lunch)
	CleverKids 06:45 - 17:30 @ R2460 p/m (all of the above with afternoon program and holiday full day care and delicious food).
	CleverKids Aftercare - 17:30 @ R1560 p/m (All of the above, excellent homework facility, holiday full day care, collecting and escorting to and from school and sport. Healthy and delicious food).
	Super Cool 06:30 - 12:30 @ R1770 p/m (small classes, occupational therapy groups, lunch)
	Super Cool 06:30 - 14:30 @ R1970 p/m (small classes, occupational therapy groups, lunch)
	Super Cool 06:30 - 17:30 @ R2070 p/m (all of the above with afternoon program and holiday full day care and delicious food).
	Super Cool Baby Room 06:45 - 17:30 @ R2490 p/m (all of the above hosted at the Kleinkind Campus).
	Super Cool Adaptive Learning Class 06:30 - 17:30 @ R3070 p/m (specialist schooling, small classes, occupational therapy groups, lunch)
	Kleinkind 06:45 - 12:30 @ R1990 p/m (specialist schooling, small classes, occupational therapy groups, lunch)
	Kleinkind 06:45 - 14:30 @ R2190 p/m (specialist schooling, small classes, occupational therapy groups, lunch)
	Kleinkind 06:45 - 17:30 @ R2490 p/m (specialist schooling, small classes, occupational therapy groups, lunch)
	Tehilla 12:30 - 17:30 @ R1640 p/m (Includes meals, specialist homework and full day holiday care)
	Atalia @ R2950
	Atalia Aftercare @ R750 (Includes meals, specialist homework and full day holiday care)

We prefer EFT's to: **KimberleyKids ABSA Cheque 406 560 1574 Branch Code 630 349**
 Reference: **Your child's name and surname and school. E.g. AlmarieStrydomClever**

I, _____ the undersigned (full name and surname of parent/guardian) **accept the terms and conditions as stipulated above and confirm that all the information provided is correct.**

Date signed _____ at _____

Signed by parent/guardian: _____ Witness: _____



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INDEMNITY AND LEGALITY OF CONTRACT

I, the undersigned _____ (full name and surname of parent/guardian), as parent/guardian of _____ (full name and surname of child), hereby indemnify Eureka Primary School, Staat Primary School, CleverKids Development Centre and/or Kleinkind Ontwikkelingsentrum, Atalia, SuperCool as well as Tehilla aftercare for any accident, illness, injury, loss of life or property or any other damage which may occur during attendance at the aforementioned institutions. This includes the attendance of tours, visits, playground activities and excursions to any of the playgrounds of the aforementioned institutions. I also give authorisation that my child may undergo any necessary medical treatment by a qualified practitioner.

This indemnity /permission is valid until the enrolled child leaves the centre, or until I retract the permission in writing.

This indemnity includes the social media platforms used by the schools. Consent is given as follows:

Kimberley Kids recognises the need to ensure the welfare and safety of all young people taking part in any activity associated with our organisation. Names and clear facial shots will not be used without signed consent.

*In accordance with our child protection policy, we will not permit photographs, video or other images of your children to be taken without the consent of the parents/carers and children. As your child will be taking part in **Facebook page for CleverKids, Kleinkind, Tehilla, Atalia, Super Cool** we would like to ask for your consent to take photographs/videos of the event or activity that may contain images of your child. It is likely that these images may be used as:*

- a record of the activity or the event
- publicity material for further activities or events on leaflets/websites/magazines
- illustrations of the activities or events in published articles

*Kimberley Kids will take all steps to ensure these images are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately, you should inform **Kimberley Kids** immediately.*

Signed at _____ on this _____ day of _____ 20_____

Signature of parent / guardian: _____

Witnesses: 1. _____ 2. _____



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