Smart Me Academy

Smart Me · Bright Me · Bright Future

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2027 ENROLMENT FORM

1 Learner details

Child's name and surname (as per birth certificate)

Name the child is known as

Child's date of birth

Child's gender

☐ Male ☐ Female

Starting date

Half day / Full day

☐ Half day ☐ Full day

Previous nursery schools / playgroups

Country of birth

Religion

Home language

2 Mother / Guardian

Mother's name

ID number

Home tel.

Work tel.

WhatsApp cell number

Email address

Mother's occupation and name of company

Home physical address

3 Father / Guardian

Father's name

ID number

Home tel.

Work tel.

WhatsApp cell number

Email address

Father's occupation and name of company

Home physical address

Postal address

4 Family & collection

Is the family unit complete?

☐ Yes ☐ No

If no

☐ Single ☐ Divorced ☐ Separated ☐ Widowed

Who does the child live with?

Grandparents or other emergency contacts (name and number)

If divorced or single, please complete the following:

1. Who may collect the child?

2. Who may not collect the child?

5 Documents required for enrolment

The following documents must accompany this enrolment form for the enrolment of your child at Smart Me Academy to be deemed effective:

☐ Copy of your child's birth certificate
☐ Copy of your child's clinic card
☐ Copy of father's ID or passport
☐ Copy of mother's ID or passport
☐ Copy of proof of address
☐ Proof of payment of registration fees

Banking details

Name	**Smart Me Academy**
Bank	**Capitec Business**
Branch code	**450105**
Account number	**1051468140**

Please use your child's name as reference.

Stationery requirements (due on the first day of school)

☐ Flip file (only if your child doesn't already have one)
☐ Zip file (only if your child doesn't already have one)

Toilet paper, Typek paper and wet wipes are included in the R650 registration fee (new learners) and the R350 re-enrolment fee (returning learners).

6 Medical information

Allergies

Reaction to allergies

Infectious diseases the child has already suffered

Serious illnesses / special needs / psychological or behavioural disorders, etc.

Any operations the child has had

Chronic medication the child is on

Doctor's name

Doctor's telephone number

Doctor's address

Medical aid company

Medical aid member number

Medical aid telephone number

Parent/guardian signature

Date

In the event of an injury at school, we will always contact the parents to inform them of what has happened and what action should be taken. In the event of a serious injury, if we cannot contact the parent or guardian, we shall take the child to the nearest emergency department.

7 Consent & indemnity

I, _____ the parent/guardian of the child _____, fully understand that, whilst Smart Me Academy is totally committed to the safety and wellbeing of my child, to which end the Academy shall endeavour to take all necessary steps, nonetheless the Academy and all its staff, paid or unpaid, cannot accept liability for the safety and possessions of its pupils and are therefore indemnified against injury, death, or damage to or loss of the personal possessions of the aforesaid. I hereby give consent for my son/daughter to take part in any extramural activities of Smart Me Academy, including games, educational tours and excursions, as well as to make use of educational and playground equipment at school.

Signed at Meyerton on this _____ day of _____ 20_____.

Parent/guardian signature

8 Marketing consent

I hereby give consent to Smart Me Academy to use photos of my child for marketing purposes on our website or wherever we see fit.

☐ **Consent given** ☐ **Consent not granted**

For marketing purposes, please let us know how you heard about us:

☐ Google ☐ A friend ☐ An advert ☐ Other: _____

9 Financial agreement

1. REGISTRATION FEE

This enrolment is subject to the payment of a non-refundable, once-off registration fee of R650 (re-enrolment fee for returning learners: R350), payable into the bank account of Smart Me Academy (details below). Please use your child's full name as a reference when paying.

2. PERSON RESPONSIBLE FOR PAYMENT

First name

Surname

ID number

⚠ IMPORTANT

3. PAYMENT METHOD

School fees are payable into the Smart Me Academy bank account; **no cash will be accepted at the Academy**. All cash deposits into the bank account must be accompanied by an **additional R50**.

4. BANKING DETAILS

Account name	**Smart Me Academy**
Bank	**Capitec Business**
Account no.	**1051468140**
Branch code	**450105**
Reference	**Child's name**

5. PAYMENT DUE DATE

Fees are payable on or before the 3rd of each month, or in advance for those who wish to pay ahead. Fees are due for 12 months of the year, from January to December.

6. DECEMBER FEES

Smart Me Academy is operational throughout the year until the specified date of closure for the December holidays. This means that the full monthly fee amount will be due irrespective of early closure of the facility for the December holidays. There is NO exception to this rule. No notice given in the month of November will be acceptable.

⚠ IMPORTANT

7. OVERDUE / ARREARS / NON-PAYMENT

A late penalty fee will be added to all overdue accounts by the **3rd of each month** following the due date. A minimum penalty fee of **R300** will be added to the invoice generated for the new month. In the event of default payment by the **second month**, a childcare suspension letter will be issued, and services will automatically be suspended until full payment has been received.

Smart Me Academy reserves the right to employ the services of an external agency for the collection of overdue fees, the cost of which will be billed to you as the account holder.

8. FEE INCREASES

Fees may be subject to an annual increase at a reasonable rate.

10 Declaration

Financial Agreement, clause 9

I, _____ and _____, the parents/guardians of

_____, hereby:

9.1 accept that the monthly fee of R_____, as selected in clause 2 of this Financial Agreement, is payable by no later than the 3rd of each month;

9.2 acknowledge and agree that all signing parties to this agreement will be held jointly and severally liable in respect of payment of any amount due and payable to Smart Me Academy; and

9.3 acknowledge that overdue accounts will be handed over to an external party for collection, the cost of which will be billed to me/us as the account holder/s.

Signed at _____ on this _____ day of _____ 20_____.

Father/legal guardian signature

ID number

Mother/legal guardian signature

ID number

Witness signature

11 Registration agreement

1. I agree to pay a R650 registration fee (R350 re-enrolment fee for returning learners) as well as the monthly fee to secure my child's place.
2. Should my child be taken out of school for any period due to being sick, going on holiday, etc., school fees are still payable.
3. ⚠ IMPORTANT I will give **one full calendar month's written notice** to the Academy management if I will be withdrawing my child from the Academy. Failing to do so, I shall be liable for **full payment of monthly fees for one month**. I acknowledge that any unpaid fees that are still owed once my child leaves the Academy will be handed over for debt collection, and I will be responsible for payment of the outstanding fees and any fees added on by the debt collector. Please note that **notice is not accepted in November or December**; in other words, if you wish to withdraw your child in November, then **December fees still have to be paid**.
4. I agree not to engage in slander in any form or on any medium about the school while my child attends the Academy or once they leave the Academy, as this may result in legal action.
5. I will settle all fees in full before leaving Smart Me Academy.
6. I will make sure that all belongings are clearly marked.
7. I agree to notify the principal of any absence, if possible before 9:00 am.
8. I agree not to send my child to school if they are suffering from any infectious sicknesses, and to keep them at home for at least 24 hours after starting a course of antibiotics.
9. I authorise Smart Me Academy to administer Panado Syrup to my child if deemed necessary, and Allergex Syrup in the case of an insect sting.
10. ⚠ IMPORTANT I agree to fetch my child by **18:00** each day or to pay a spot fine of **R50.00** late pick-up fee for **every 30 minutes** or part thereof to the teacher on duty.
11. I understand that there are no refunds of any monies paid under any circumstances, including the registration fee.
12. I understand I will need to supply **stationery**.

I fully understand and acknowledge the above terms:

I, _____, will be responsible for payment of fees.

Place

Date

ID number

Signature