



ALBERVIEW PRIMARY SCHOOL

2027 ENROLMENT FORM

GRADE APPLYING FOR: _____

**HIGHEST GRADE
ACHIEVED:** _____

**Are you making more
than 1 application to
the school? (For
another sibling):** _____

**If yes, which
Grade?** _____

PLEASE ATTACH **CERTIFIED COPIES** OF THE FOLLOWING DOCUMENTATION TO YOUR APPLICATION FORM. IF ANY DOCUMENTATION IS MISSING, WE ARE UNABLE TO PROCESS THE ENROLMENT FORM.

PLEASE COMPLETE FORM IN A **NEAT AND LEGIBLE** HANDWRITING

DOCUMENT	ATTACHED	NOTES
Child's birth certificate (Unabridged)		
2x Passport photos of child		
Child's clinic card		
Child's latest nursery school/school report		
ID Father		
ID Mother		
Marriage certificate (if applicable)		
Proof of residence: See attachment for documents required. We reserve the right to confirm residence.		
Proof of employment father (current payslip)		
Proof of employment mother (current payslip)		
UIF registration (where employed as Domestic)		
Divorce agreement (if applicable)		
Immigrants: Resident/Work/Study permits. If not available, proof of application for the permit must be presented.		
Guardianship papers (if applicable). Where a child has been placed into your care due to death/incapacity of natural parents etc. we require a legal document – not a police affidavit – that the child has been legally placed into your care.		

**FOR OFFICE USE
ONLY**

ADMISSION NO. _____

ACCOUNT NO. _____

CLASS ALLOCATION _____

SPORTS HOUSE _____

LEARNER'S SURNAME					
LEARNER'S FULL NAME					
ID NUMBER					
DATE OF BIRTH			GENDER (TICK)	MALE	FEMALE
HOME LANGUAGE		RACE		RELIGION	
HOME ADDRESS					
CITIZENSHIP			PASSPORT NUMBER		
NAMES OF SIBLINGS: BROTHERS/SISTERS AT ALBERVIEW (NOT COUSINS OR OTHER RELATIVES)				GRADE	
				GRADE	
DEXTERITY (LEFT OR RIGHT-HANDED)					
PARENTS DECEASED (TICK):	NONE	MOTHER	FATHER	BOTH	
NAME OF PREVIOUS SCHOOL					
HAS LEARNER REPEATED A GRADE (STATE GRADE IF YES)					
NAME & SURNAME OF TRANSPORT SERVICE/TAXI (IF USING)			TRANSPORT NUMBER		
MEDICAL AID			MEDICAL AID NUMBER		
FAMILY DOCTOR'S NAME			DOCTOR'S NUMBER		
ANY ALLERGIES/ CHRONIC ILLNESS					

	BIOLOGICAL FATHER				BIOLOGICAL MOTHER				GUARDIAN/ALT CONTACT			
MARITAL STATUS	MARRIED	DIVORCED	SINGLE	WIDOW	MARRIED	DIVORCED	SINGLE	WIDOW	MARRIED	DIVORCED	SINGLE	WIDOW
WITH WHOM DOES CHILD STAY	BOTH PARENTS	FATHER	GUARDIAN	OTHER	BOTH PARENTS	MOTHER	GUARDIAN	OTHER	ADOPTIVE	STEP PARENT	FOSTER PARENT	LEGAL BY COURT
TITLE	MR	DR	PROF	OTHER	MRS	MISS	DR	OTHER	MR/MRS	MISS	DR	PROF
IF GUARDIAN-RELATIONSHIP TO LEARNER												
SURNAME												
NAMES												
CITIZENSHIP												
PASSPORT NUMBER												
ETHNIC GROUP												
ADDRESS												
ID NUMBER												
OCCUPATION												
EMPLOYER												
WORK ADDRESS												
HOME TEL.												
CELLPHONE												
WORK TEL.												
EMAIL ADDRESS												
WORK EMAIL ADD.												
SIGNATURE												



ALBERVIEW PRIMARY SCHOOL

SCHOOL FEES – FINANCIAL COMMITMENT

We/I, the undersigned, hereby apply to the Principal of Alberview Primary for admission of my child, (full name & surname of child), _____ to Grade ____ from Year 2027 and acknowledge that we/I will be responsible for the payment of school fees in respect of the above-mentioned child until such time as written notification is received of the child being transferred to another school. We/I hereby confirm that, in the event of the application being successful, a deposit of R2 200-00 will be payable either via cheque/cash/EFT. This amount will be credited to the first month's school fees.

We/I acknowledge that we/I am aware of the fact that my child will be **provisionally admitted** to the school upon admission of this completed form together with a signed Indemnity form and certified copies of the requested documentation.

We/I further acknowledge that we/I am aware that the principal shall not be bound to admit my child to the school should we/I not comply with the conditions stated above. We/I agree that we/I have read, understood and accept the terms, conditions and undertakings as set out in the **Code of Conduct** of the school.

I hereby certify that all details provided are true and correct. I hereby confirm that I'm aware that if any information provided herewith is falsified it will lead to legal action being taken against the applicant and possible deregistration and consequent placement at relevant schools.

We/I hereby confirm that we/I undertake and agree to pay the Compulsory Tuition Fees, as stipulated annually by the School Governing Body, notwithstanding any change in my/our marital status or any divorce agreement which we/I might conclude with my spouse and that we/I am authorized to sign this document. We/I have read and understood the contents of this document. Furthermore, we/I acknowledge that the information furnished is true and correct and we/I undertake to notify the school, in writing, of any change of these details.

We/I am aware that, in the event of a breach of these terms and of the fees not being paid timeously, the school is entitled to institute proceedings against us/me and that we/I will also be held responsible for all costs incurred by the school to recover such fees.

In terms of the South African Schools' Act, 1996 (section 39) **we/I undertake to pay the school fees** (tick option):

Monthly

Yearly in advance

<input type="checkbox"/>
<input type="checkbox"/>

	<u>MOTHER/GUARDIAN</u>	<u>FATHER/GUARDIAN</u>
Surname:	_____	_____
Full names:	_____	_____
I D Number:	_____	_____
Marital Status:	_____	_____
Residential address:	_____	_____
	_____	_____
Tel. no. home:	_____	_____
Cell no.:	_____	_____
Tel. no. work:	_____	_____
E-mail address: (Where statements can be sent to)	_____	_____

Signed at Alberton this _____ day of _____ 20_____

Mother/Legal Guardian

Father/Legal Guardian

Witness

Witness

SOUTH AFRICAN SCHOOLS ACT NO 84 OF 1996
Regulations for the Exemption of Parents from Payment of School Fees

In terms of the above act payment of school fees is compulsory unless the Parents/Legal Guardian have been totally exempted from paying.

1. Have you been informed about the amount of school fees to be paid for 2026? (Current fees R20 649.45)	YES	NO
2. Has it been explained to you that payment of school fees is compulsory unless you are totally exempted from payment?	YES	NO
3. Do you understand that you have the right to apply for exemption if the combined household income is less than R589 954.00 per annum? (Based on 2026 fees)	YES	NO
4*. Do you intend applying for exemption?	YES	NO
5*. Do you need assistance in making such an application?	YES	NO

CHECKLIST (Mark the applicable box with a cross)

* If you answer yes to question 4 / 5, an Exemption Application form must be requested via email to admin@alberview.org.za. These will be available during January of the new school year.