

Email: admin@wintertonprimary.co.za

info@wintertonprimary.co.za (finance)

sport@wintertonprimary.co.za

website: www.wintertonprimary.co.za

APPLICATION FOR ADMISSION 2024

ALL DESIGNATED SECTIONS REQUIRING SIGNATURES MUST BE SIGNED IN FULL AND EVERY PAGE MUST BE INITIALED

(THIS FORM MUST BE COMPLETED IN FULL)

CHILD'S FULL NAME/S:	PRINT ALL NAMES AND SURNAME CLEARLY AS PER BIRTH CERTIFICATE
GRADE IN 2024:	ENGLISH / AFRIKAANS:

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NEW ADMISSIONS/NUWE TOELATINGS

You will be required to supply us with a copy of the following:



- An Official / UNABRIDGED Birth Certificate of the Child. (If not available, kindly apply at Home Affairs and bring a copy of your receipt.) / Geboortesertifikaat van die kind. (Indien nie beskikbaar nie, doen aanvraag by Binnelandse sake en bring n afskrif van jou bewys).
- 2. Clinic Card. / Kliniek Kaart.
- 3. 2 x I.D. Photo's. / 2 x I.D. Foto's.
- 4. Copy of School report of last term. / Oorsprinklike Skool rapport van die laaste kwartaal.
- 5. Copy of Medical Aid Membership card. / 'n Afskrif van u Mediesefonds Lidmaatkaart.
- 6. Certified I.D. Certificate of both parents OR guardians. / Gesertifiseerde I.D. Sertifikaat van albei ouers OF voogde.
- 7. Temporary or Permanent Residence Permit from the Department of Home Affairs or a Study Permit for non-RSA citizens or evidence that an application per permission to stay in South Africa has been made.
- 8. Copy of both parents salary slips. / Afskrif van albei ouers se salarisstrokies.
- 9. Proof of Residence
- 10. Affidavit (If child does not live with biological parents.)
- 11. Winterton Primary School is covered by The ONE Edu Emergency Assist Scheme underwritten by Mutual & Federal. This is an emergency insurance only and NOT a medical aid. Medical expenses for a child injured at school or any school event are covered under this policy. The initial medical /hospital expenses are covered but any after care or post treatment is not covered under this scheme.

 In the event of an accident the correct procedure will be followed by the Coach/Educator and the persons concerned will be informed of the procedure to follow. (Refer to Section G)

The admissions committee aims to have all responses to applications finalized by the end of September and will communicate responses via email – please ensure that the email address you have provided is correct and is regularly checked. To ensure our email does not end up in your 'junk' or 'spam' folder, please add the email address admin@wintertonprimary.co.za to your safe senders list (or ensure that you regularly check these folders as well as your inbox). It is of utmost importance to have an email address. That's the way we will be communicating with you as parent!

- a) Please ensure that numbers and letters are written clearly to ensure that we are able to make contact with you.
- b) Please note that submission of this application does NOT guarantee admission.
- c) Queries can be made via telephone on 036 488 1513 or email to admin@wintertonprimary.co.za
- d) NO CASH PAYMENTS STRICTLY EFT OR SPEEDPOINT. CASH TO BE DEPOSITED AT NEDBANK.



APPLICATION FOR ADMISSION-2024



Department: Education PROVINCE OF KWAZULU-NATAL

LEARNER INFORMATION	FOR
	Family code:
e:	Register class:
:	Admission number:
r:	
number:	LEAR
lity:	Family status:
s denomination:	☐ Both parents
	Single parent (Un
oup:	☐ Foster care
anguage:	Re-composed
er's preferred Teaching Language:	
r Right handed:	Parents deceased:
sion date:	
ntly in grade:	LEARNER HEALTH II
ered for / Receiving Social Grant: YES NO	Chronic Medical condit
od of transport: (e.g. Private/Taxi/Bus)	Allergies:
e of Driver:	Medication:
t number:	
XT OF KIN INFORMATION	MEDICAL AID INFOR
e:	Medical Aid Name:
t number:	Telephone number:
ive contact number:	Member number:
	Main Member Name: _
:	FAMILY DOCTOR INF
act number:	Name:
ve contact number:	Telephone number:
on:	Business Address:
of persons who may NOT collect the learner:	



Primary/Primêr 'Deeds not Words'



Private Bag X11 Winterton 3340 Tel: 036 488 1513

lame of applicant's present school:			
as the applicant ever repeated a sch	ool year?	If yes, whi	ch grade?
What was the reason for repeating? _			
oes the applicant have a sibling(s) (b	orother / sister) who curr	ently attend Winterto	n Primary? If yes, please
upply full names below:	. ,	,	, , , , ,
Name and Surname	Current Grade	Year Started	School House
LEASE PROVIDE FURTHER INFORMA	TION ABOUT THE APPLICA	ANT UNDER THE FOLL	OWING HEADINGS:
ACADEMIC (Achievements, learning o	lifficulties etc.):		
ACADEMIC (Achievements, learning o	lifficulties etc.):		
ACADEMIC (Achievements, learning o	lifficulties etc.):		
ACADEMIC (Achievements, learning o	lifficulties etc.):		
PLEASE PROVIDE FURTHER INFORMATA ACADEMIC (Achievements, learning of the second of th	lifficulties etc.):		
ACADEMIC (Achievements, learning of	articipation, achievemen	t, level of representat	ion etc.):
ACADEMIC (Achievements, learning o	articipation, achievemen	t, level of representat	ion etc.):

BIOLOGICAL PARENT 1 / LEGAL GUARDIAN 1 INFORMATION

Title:	Postal address:
Full Names:	
Surname:	
Initials:	Occupation Status:
Preferred name:	Own employer – Non-Professional
ID number:	Own employer –Professional
Home language:	☐ Housewife ☐ Part time
Language preference:	Contract worker Pensioner
Cell phone number:	Student Temporary
Home Tel Number:	☐ Full Time ☐ Unemployed
Fax number:	Occupation:
Email:	Employer:
(No other communication methods)	Work Telephone number:
Residential Address:	Employer physical address:
	Is the learner living with this parent? (Yes/No)
Relation to child:	Biological parent or guardian?
DIOLOGICAL DADENTO / LE	CAL CHARRIAN SINESPINATION
BIOLOGICAL PARENT Z / LEO	GAL GUARDIAN 2 INFORMATION
Title:	Postal address:
Title:	
Title:	
Title: Full Names: Surname:	Postal address:
Title: Full Names: Surname: Initials:	Postal address: Occupation Status:
Title: Full Names: Surname: Initials: Preferred name:	Postal address: Occupation Status: Own employer – Non-Professional
Title: Full Names: Surname: Initials: Preferred name: ID number:	Postal address: Occupation Status: Own employer – Non-Professional Own employer –Professional
Title: Full Names: Surname: Initials: Preferred name: ID number: Home language:	Postal address: Occupation Status: Own employer – Non-Professional Own employer –Professional Housewife Part time
Title: Full Names: Surname: Initials: Preferred name: ID number: Home language: Language preference:	Postal address: Occupation Status: Own employer – Non-Professional Own employer –Professional Housewife Part time Contract worker Pensioner
Title:	Postal address: Occupation Status:Own employer – Non-ProfessionalOwn employer –ProfessionalPart timePart timeContract workerPensionerStudentTemporary
Title:	Postal address:
Title: Full Names: Surname: Initials: Preferred name: ID number: Home language: Language preference: Cell phone number: Home Tel Number: Fax number:	Postal address:
Title: Full Names: Surname: Initials: Preferred name: ID number: Home language: Language preference: Cell phone number: Home Tel Number: Fax number: Email:	Postal address:
Title: Full Names: Surname: Initials: Preferred name: ID number: Home language: Language preference: Cell phone number: Home Tel Number: Fax number: Email: (No other communication methods)	Postal address:
Title: Full Names: Surname: Initials: Preferred name: ID number: Home language: Language preference: Cell phone number: Home Tel Number: Fax number: Email: (No other communication methods)	Postal address:
Title: Full Names: Surname: Initials: Preferred name: ID number: Home language: Language preference: Cell phone number: Home Tel Number: Fax number: Email: (No other communication methods)	Postal address:
Title: Full Names: Surname: Initials: Preferred name: ID number: Home language: Language preference: Cell phone number: Home Tel Number: Fax number: Email: (No other communication methods)	Postal address:

ACCOUNTABLE FOR SCHOOL FEES

ON SYSTEM:			
☐ Biological Parent 1	Biological Parent 2	Other	
"Only if "Other", please complete	section A or B below:		

INDIVIDUAL
Title:
Full Names:
Surname:
Initials:
Preferred name:
ID number:
Home language:
Language preference:
Cell phone number:
Home Tel Number:
Fax number:
Email:
(No other communication methods)
Residential Address:

Title:
Registration Number: Language preference: Contact number: Fax number: Email:
Language preference: Contact number: Fax number: Email:
Contact number: Fax number: Email:
Fax number:
Email:
Business Address:
Postal Address:

BANKING DETAILS

Bank: NEDBANK - Cascades - Current

Branch - Cascades Branch Code: 198765 Bank account number: 1201 566 029 Acc. Name: Winterton Primary

Ref: Account number
Email or fax proof of payment to:
Email: accounts@wintertonprimary.co.za

Fax: 036 488 1514 / 086 678 3891

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SECTION E: INDEMNITY FORM FOR EXTRAMURAL ACTIVITIES

CONSENT AND INDEMNITY FORM

(To be used only in the case of learner transport for school activities of Section 1 of the South African Schools Act)

<u>l,</u>	, parent/guardian of	in Grade
	s participation in any fundraising project, business activity of that has been approved by the governing body or school	or any other activity other than a school activity in terms of principal, either on or outside the school grounds.
I acknowledge that my child	's participation in the abovementioned activities shall be at	own risk.
I further agree that the staff premises.	of the school, or a person appointed by the school, may tra	ansport my child to and from the activities outside the school
	ily transports a learner in a non-official capacity, it shall be all not accept responsibility for any risk.	deemed an arrangement between the parents and the
the necessary caution to engoverning body or the school	sure my child's safety. I further realise that none of the star of itself may be held liable for the loss of any personal posse y waive any right to claim whatsoever against the school th	ession or any other loss or damage that may be incurred or
assistance for my child shou knowledge, the child is in go	od health. Those responsible are however requested to no	ties to which this indemnity form pertains. To the best of my
I acknowledge the following	:	
activity.	and indemnity does not apply to school activities, and that and indemnity in no way constitutes a waiver of the minor's	the state is liable for any damage that may arise from a schools right to institute any claim.
SIGNATURE OF PARENT / G	UARDIAN	DATE
PLEASE NOTE THAT TH	IS IS A DIFFERENT CONSENT AND MUST BE SIGN	NED.
(To be used	CONSENT FOR LEARNER TRA	
<u>l,</u>	, parent/guardian of	in Grade
hereby consent to my child'	s participation in any school activity¹ outside the school pre	emises.
_	ators of the school, or a person appointed by the school, nities outside the school grounds.	nay transport my child to and from the school premises for
I acknowledge the following	:	
	applies to school activities, and that the state is liable for arn no way constitutes a waiver of the minor's right to institu	
SIGNATURE OF PARENT / G	UARDIAN	DATE
1 A school activity is define	d as 'any official educational cultural recreational or social activity of the school	within or without the school premises' Section 60/1) of the South African Schools As

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omission in connection with any school activity conducted by a public school and for which such public school would have been liable but for the provisions of this section.*

provides that the state is liable for any damage that may arise from a school activity: *(1) (a) Subject to paragraph (b), the State is liable for any damage or loss caused as a result of any act or

SECTION F: UNDERTAKING BY PARENTS / GUARDIANS / SPONSORS

In accordance with section 39 of the SA School Act 84 of 1996 ("the Act"), a public school may only determine the school fees if the majority of parents agreed to the fees, as per section 83(2) of the Act, at a general meeting.

According to section 40 of the SA Schools Act, 84 of 1996 the parent undertakes to pay the subscribed school fees as set out. A parent is liable for the payment of school fees in accordance with section 39 of the Act, unless he is exempt by law from paying.

In accordance with Section 39 of the SA School Act, 84 of 1996

- a. A parent is liable to pay the school fees determined by the Governing Body.
- b. The Governing Body may, by process of law, enforce the payment of school fees by parents who are liable to pay in terms of section 40 and 41 of the Act.
- c. Living, biological parents are jointly and severally liable for the payment of school fees irrespective of their marital status.
- d. Legal action may be taken against **BOTH** parents regardless of any maintenance or court actions between parties.
- e. Parents, who are unable to pay, may apply for exemption or partial exemption, before the end of FEBRUARY of each year.
- f. Outstanding school fees are handed over for collection if **60 DAYS OVER**. You will be liable to pay all collection fees, as well as the legal costs between attorney and client, if the Governing Body of the school finds it necessary to take legal action against you for the non-payment of school fees and/or any other money outstanding.
- g. School fees are payable annually or monthly in advance, subject to payment conditions set out below.
- I/We hereby apply to have the child whose name appears on this form as a learner at WINTERTON PRIMARY SCHOOL.
- I / We hereby certify that I / we have legal custody and / or guardianship in respect of the above named learner.
- I / We understand that pupils and their parents / guardians have to abide by the school's ethos, policy, rules and regulations, including the School's standards of discipline, dress, behaviour, attitude, extramural activities and social values, and to the various alterations in the rules and disciplinary code that may be made from time to time.
- I / We understand and confirm that the Principal or any person duly authorised, will act in *loco parentis* in any matter and at any time during which I / we have entrusted our child to the care of the school. *Loco parentis* begins 30 minutes before the official start of school and ends 30 minutes after any school event.
- I / We understand that while every reasonable effort will be made to prevent losses or damage to the learner's clothing and equipment, the school cannot be held liable for such.
- I/ We undertake to reimburse the school for any damage to school property that may be caused by our child.
- I / We undertake to give a term's notice in writing of any intention to remove my / our child from the school and furthermore to return any books and / or equipment belonging to the school which our child may have.
- I/ We understand that the school reserves the right to verify all information supplied to them via this application. In the event of fraudulent documents submitted, the school reserves the right to lay a criminal charge of fraud against any of the parties to this application.
- I / We accept responsibility for immunizing our child / children against contagious diseases and infections, and shall produce proof thereof if required to do so;
- I / We accept the responsibility of the pupil's transport to and from school, and will ensure that the pupil is collected at 2pm unless the pupil is participating in the extra or co-curricular programme, where after the pupil will be collected timeously.
- I / We undertake to inform the class teacher of our child's / children's absence from school.
- I/ We declare that we are prepared to produce a doctor's certificate if and when required. Infectious illness: the return of learners to the school after infectious illness, or contact with infection, is allowed only on presentation of a medical certificate. All learners who are absent for longer than two consecutive school days should bring a doctor's note with them on their return.

Learners who are absent on the day of a scheduled assessment activity must produce a medical certificate on the day of their return to school and will be required to complete the assessment activity on the day of return.

Except in cases of illness, learners may not be absent from school or from matches, or other compulsory school activities without permission being obtained beforehand from the principal or relevant teacher in charge.

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I/ We undertake to support the school's constitution and policy of admission, as defined and implemented by the School Governing Body.

I/We understand that smoking in school uniform, the abuse of any drug or alcoholic beverage and possession of any dangerous weapons on school property are infringements of the critical school rules and will not under any circumstances be tolerated.

I / We understand that learners go on tours and day outings during the year. This is a privilege, not a right and they are only entitled to go on these trips at the discretion of the staff. The signatory hereby chooses *domicilium citandi et executandi* as indicated below. In the event of a change of address and telephone numbers, parents are to notify the school in writing. Remission forms available at school and to be completed in full and handed in on or before 28 February every year.

This contract will be valid and binding from the day on which it is signed by the parent or guardian.

The parent / guardian declares that he / she is the legal guardian of the child and is entitled to sign this document, and shall be bound hereto both as parent / guardian, and in his / her personal capacity.

ADDRES	SS: The signatory he	reby chooses domicil	um citandi et executandi (<u>OFFICIAL HON</u>	ИЕ ADDRESS) as:	
<u>Physical</u>	Address Address				
	SIGNED on the	day of		20	
	PARENT / GUARDI	AN SIGNATURE:			
			SECTION G: ONE INSURA	ANCE	
	,	your child is of utmostive solution in the ev	at importance to our school. It is with this ent of an emergency.	in mind that our school has p	partnered with ONE Insurance
	u Emergency Assist w ont in the shortest po	. , ,	ed to remove any uncertainty from the em	nergency, and to ensure that a	learner gets the best possible

It is important to note that this is an EMERGENCY PRODUCT and not a medical aid.

The following points are important in understanding the product:

- Cover is for any injury while under the jurisdiction of the School.
- We are only allowed to cover for the emergency. Once the emergency is deemed to be over cover stops.
- Should a parent have a medical aid, the medical aid must cover first (see below for more information)

•

IMPORTANT PRODUCT INFORMATION:

The following is vital to the success of this product:

- 1. The process MUST be started on the same day of the accident / injury
- 2. Cover STOPS as soon as the student has been DISCHARGED (NO further cover)
- 3. Cover is for any injury under the jurisdiction of the school
- 4. Medical Aid must cover first, if applicable. This product will settle cost not covered by the Medical Aid.
- 5. All fees paid from Medical Savings Account will be refunded to parents.
- 6. No excess applicable.

We trust you see the benefits in taking hands as we work together to ensure the safety of your child.

Please do not hesitate to contact us should you have any questions concerning ONE Insurance.

SIGNED on the day of	20	
PARENT / GUARDIAN SIGNATURE: _		

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UNDERTAKING BY PARENTS / GUARDIANS / SPONSORS

I / We understand that both parents, mother and father, and / or guardian and / or sponsor, are jointly and severally liable for the school fees as determined by statutory regulation annually, and that the fees will be paid in accordance with the requirements set out from time to time for the duration of my son's / daughter's / ward's school career at Winterton Primary School.

I / We undertake to pay the school fees levied by the Governing Body by no later than the first of each year. I understand that the contribution of this amount, duly approved by a General Meeting of parents held in accordance with the South African Schools Act (84 of 1996), is enforceable by law.

I/We will be responsible for the prompt payment of school fees, which is due as per our agreement with the school and as determined from time to time by the Governing Body. When in default of paying the school fees as agreed upon, the total school fees for the year will become due and payable immediately, interest at the prescribed rate can be added to the total amount outstanding from date in Mora. The parent/guardian that defaults will be held liable for all costs and fees incurred during collection on a Attorney to own Client scale, provided for in the Act of Debt Collecting of 1998, specifically tracing costs and any other fees and costs that has already been incurred or will be incurred in future.

I / We undertake to purchase such books and materials as may be reasonably required by the learner as determined by the School, or by its duly authorised representative.

I / We undertake, where requested by the School, to pay for all school excursions and activities, which may be organised by the School or it's duly authorised representative, in which the learner participates from time to time.

PLEASE READ THE FOLLOWING:-

FEES FOR 2024 – TO BE CONFIRMED!

ı	/We	unde	rstand	the	follo	wing:_

- a. The annual school fees will be a compulsory sum of R 25 100.00 p.a. for 2023 as adopted by the majority of parents at the AGM.
- b. Once you have received an Acceptance Letter from Winterton Primary School, R3000 is to be paid immediately as confirmation of your child's enrolment. This amount will be deducted from the R25 100.00 compulsory annual fees. The R3000 YEARLY STARTER PACK covers stationary, art supplies, insurances, affiliation fees (Country Club as well as other organisations), Outing transport fees and Computer licences for Educational programmes. PLEASE NOTE: The yearly starter pack fee is payable for each year that your child is a registered learner at Winterton Primary School.
- c. The REMAINING R 22 100.00, is due on the 1st day of school or by the following terms:-

Please tick where applicable.

- i) MONTHLY R2210-00 per month payable on the 5th day of each month over 10 months.
- ii) TERMLY R5525-00 per term payable on the 1st day of each term.
- iii) ONCE OFF R20 845-00 payable by the 31st of January in order to qualify for the 5% discount.
- d. I/We hereby authorise the Governing Body of Winterton Primary School, or its duly authorised representative, to conduct a full credit investigation into my/our affairs and to report me/us to any Credit Bureau upon non-payment or late payment of any amount due and payable.
- e. In the event of the School Governing Body instituting legal action against me for the payment of school fees or for any reason whatsoever that I/we agree and undertake to pay all legal costs on an attorney and own client scale including tracing agent's charges, collection commission and all incidental costs thereto.
- f. Please note that no remission is granted for stationery and insurance and all remission applications must be submitted before the end of February of each year.
- g. Statements will be sent via email Email Address:-____________________________

I / We understand the following:

- a. If the parent /s fail to meet their school fee obligations the school may record the parent /s non-performance with the credit information bureaux.
- b. The school may monitor the parent /s payment behaviour by researching the parent /s record at one or more credit information bureaux.
- c. The school may conduct a credit enquiry and / or a credit information search about the parent /s with a credit information bureau, persons acting as their agents and / or other credit grantors.
- d. Any information conveyed to a credit information bureau will be available to other credit grantors and used in making credit risk management related decisions

I / we undertake to give the Governing Body written notice of not less than one school term before removing the above pupil/s from the school irrespective of the reasons for such removal. If such notice is not given, payment in lieu of notice amounting to a term's contribution will become payable.

I hereby choose dom icillium citandi et executandi (official residential address), as that furnished under section F and am legally responsible for paying the above learner's (and siblings') school fees.

MOTHER	<u>FATHER</u>	<u>LEGAL GUARDIAN / SPONSOR</u>
Name:	Name:	Name:
Signature:	Signature:	Signature:
Date:	Date:	Date:
he enus is on the narent / legal guardian / spensor :	and the person registering the pupil to ensure the scho	al face are paid and we therefore require all cignatur

The onus is on the parent / legal guardian / sponsor and the person registering the pupil to ensure the school fees are paid and we therefore require all signatures if such parties are not the same



Primary/Primer
'Deeds not Words'



Private Bag X11 Winterton 3340

SCHOOL FEE PAYMENTS - 2024 TO BE CONFIRMED

MONTHLY	<u>DUE BY</u>	1 CHILD	2 CHILDREN	3 CHILDREN	4 CHILDREN
YEARLY STARTER PACK FEE	30 November	3 000-00	6 000-00	9 000-00	12 000-00
January	5 January	2 210-00	4 420-00	6 630-00	8 840-00
February	5 February	2 210-00	4 420-00	6 630-00	8 840-00
March	5 March	2 210-00	4 420-00	6 630-00	8 840-00
April	5 April	2 210-00	4 420-00	6 630-00	8 840-00
May	5 May	2 210-00	4 420-00	6 630-00	8 840-00
June	5 June	2 210-00	4 420-00	6 630-00	8 840-00
July	5 July	2 210-00	4 420-00	6 630-00	8 840-00
August	5 August	2 210-00	4 420-00	6 630-00	8 840-00
September	5 September	2 210-00	4 420-00	6 630-00	8 840-00
October	5 October	2 210-00	4 420-00	6 630-00	8 840-00
		R25 100-00	R50 200-00	R75 300-00	R100 400-00
PER TERM					
YEARLY STARTER PACK FEE	30 November	3 000-00	6 000-00	9 000-00	12 000-00
1 st Term	1 January	5 525-00	11 050-00	16 575-00	22 100-00
2 nd Term	1 April	5 525-00	11 050-00	16 575-00	22 100-00
3 rd Term	1 July	5 525-00	11 050-00	16 575-00	22 100-00
4 th Term	1 October	5 525-00	11 050-00	16 575-00	22 100-00
		R25 100-00	R50 200-00	R75 300-00	R100 400-00
IN FULL					
1 ST DAY OF SCHOOL					
YEARLY STARTER PACK FEE	30 November	3 000-00	6 000-00	9 000-00	12 000-00
Payment	By 31 January	20 845-00	41 690-00	62 535-00	83 380-00
Discount Allowed		1 255-00	2 510-00	3 765-00	5 020-00
		R25 100-00	R50 200-00	R75 300-00	R100 400-00

The R3000 YEARLY STARTER PACK covers stationery, art supplies, insurances, affiliation fees (Country Club as well as other organisations), Outing transport fees and Computer Licences for Educational programmes.

PLEASE NOTE: The yearly starter pack fee is payable for each year that your child is a registered learner at Winterton Primary School.

Please note that if account number is not used as the reference then the payment will NOT be allocated.

BANKING DETAILS:

Bank : NEDBANK

Branch : Cascades - Current

Branch Code : 198765 Acc. No. : 1201566029 Acc. Name : Winterton Primary

Reference : Account No ONLY For School Fees and Bus – e.g. Account No + SURNAME

Email or Fax proof of payment to:- accounts@wintertonprimary.co.za

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