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BUILDING BLOCKS PRE-SCHOOL

PUPIL ENROLMENT FORM

Full Name of Pupil MALE/FEMALE.....
DOB..... BIRTH CERTIFICATE ID No..... (Attach copy)
Full Name of Father Marital Status.....
ID No. Tel No Cell No.....
Email Address.....
Occupation..... Employer.....
Work address..... Work contact no.....
Full Name of Mother..... Marital Status.....
ID No. Tel No Cell No.....
Email Address.....
Occupation..... Employer.....
Work address..... Work contact no.....
Number of Children in Family is Pupil 1st 2nd 3rd etc.....
Last Pre -School attended by pupil.....
Date of leaving the above mentioned school.....
Home Language of Family.....
Underline Illnesses Pupil has had
Chicken Pox, Diphtheria, Enteric Fever, Measles, Rubella (German measles), Mumps, Scarlet Fever, Whooping Cough, Bilharzias, Chorea (St Vitas' Dance), Malaria, Rheumatic Fever.

State any other illness not mentioned above from which the pupil has suffered.....

State if the Pupil has had any operations, if so, when and for what.....

Does the Pupil suffer from any allergies?.....

Underline whether the Pupil been immunised against the following
Diphtheria, Poliomyelitis, Tetanus, Measles, Tuberculosis, Hepatitis B.

State any concerns you may have regarding your child's development.....

Family Doctor's Name Contact No

Alternative details and contact number in the event of an emergency.....

I,the undersigned, being the legal guardian of.....
do agree to abide by the School rules and undertake to pay the school fees laid down, and should the need arise, agree to give one month's written notice of withdrawal of my child / children, failing this, undertake to pay a full months fees in lieu of notice. Should my account be handed over to our Debt Collectors for collection, I understand that I will be liable for legal costs incurred herein e.g. Admin, 15% collection commission, tracing costs, disbursement and any other necessary costs which may be incurred.

I have paid my non-refundable registration fee of.....on (date).....

Indemnity

Although our school cannot be seen responsible for unforeseen circumstances, we are committed to taking all reasonable precautions to ensure the safety of our learners.'

Date:.....

SIGNATURE