



MILKWOOD PRE-PRIMARY SCHOOL
APPLICATION FOR ENROLMENT

28/30 Kinrae Crescent, Fish Hoek, 7975 Tel. 021 782 4160
Email: milkwoodpre1@gmail.com

CHILD'S DETAILS: Surname:..... Christian names:.....
Date of Birth: Sex:

PARENTS'S DETAILS: MOTHER FATHER
Full Name:
Postal Address:.....
Home Tel. No.:
Work Tel. No.:
Cell No.:.....
Identity No.:.....
Email address:
Occupation:.....

IN CASE OF EMERGENCY: Contact number:
Contact person:
Name of Doctor:.....
Doctor's Tel. No.:

Home Language: Religion:
Other children in the family, if so state no. & ages:
Has child previously attended any school/playgroup/crèche?
If so, state name:
Anything special we should know about your child, i.e. special difficulties, problems, allergies, recent divorce, death etc.:
Previous Illness:
When would you like your child enrolled at Milkwood (year)?
Would you require aftercare for your child? If so, until what time?:.....

- 1. We the undersigned, undertake to pay the fees in ADVANCE and to give ONE MONTH'S WRITTEN NOTICE before removing our child from the school or a full month's fees in lieu of notice.
2. We agree to abide by the RULES of the School.
3. We agree to pay the no-refundable deposit of R1000.00 and R500.00 will be credited to your account once your child starts school.
4. Your application is considered confirmed on receipt of the above deposit.

SIGNATURE OF PARENTS:
(Mother) (Father)

DATE OF APPLICATION:

This form is considered confidential. It is no guarantee of acceptance to the school (see point 4 above).
Milkwood Pre-Primary School reserves the right to run credit checks.