



GAUTENG DEPARTMENT OF EDUCATION

Tel: 011 706-1263 | Fax: 011 706-1307 | Email: mbritz@bryanstonprimary.co.za | Web: www.bryanstonprimary.co.za | P.O. BOX 67133, Bryanston 2021

**ADMISSIONS 2018**

In order for the Admissions Committee to expedite this application it is vital that you read through this form carefully, provide all of the information and certificates required, and return the application form from 2<sup>nd</sup> May 2017 TO 12 June 2017.

**Admissions times will be strictly from 08h00 to 14h00**

**LEARNER INFORMATION FORM**

**Office use only:**

**APPLICATION - 2018**

<b>DATE ISSUED</b>		<b>DATE RETURNED</b>		<b>RECEIVED BY</b>	
<b>Waiting List nr</b>					

**Child's Name** \_\_\_\_\_

**GRADE IN 2018** \_\_\_\_\_

**CURRENT GRADE IN 2017** \_\_\_\_\_

**HAS THE LEARNER REPEATED A GRADE?** \_\_\_\_\_

**IF YES, WHAT GRADE** \_\_\_\_\_

**Current School:** \_\_\_\_\_ **Contact Number:** \_\_\_\_\_

**PARENT'S/GUARDIAN'S PARTICULARS**

**BIOLOGICAL FATHER/GUARDIAN**

**BIOLOGICAL MOTHER/GUARDIAN**

Title						Title					
Surname						Surname					
Initials						Initials					
First Name						First Name					
Home Language						Home Language					
Marital Status	Married	Divorced	Separated	Widowed	Single	Marital Status	Married	Divorced	Separated	Widowed	Single
ID Number						ID Number					
Immigrant's Permit Number						Immigrant's Permit Number					
Country of origin						Country of origin					
Date of entry in SA						Date of entry in SA					
Date of birth						Date of birth					
Race (GDE requirement)	African	Asian	Coloured	White		Race (GDE requirement)	African	Asian	Coloured	White	
Home Address & Post Code						Home Address & Post Code					

Postal Address & Post Code		Postal Address & Post Code	



**PARENTS CONTACT NUMBERS - Please use area code first followed by the number**

☎ Home		☎ Home	
☎ Fax		☎ Fax	
☎ Cellular		☎ Cellular	
Private		Private	
E-mail		E-mail	

**PARENTS WORK DETAILS**

BIOLOGICAL FATHER/GUARDIAN EMPLOYER		BIOLOGICAL MOTHER/GUARDIAN EMPLOYER	
Employer		Employer	
Nature of Business		Nature of Business	
Position/Title		Position/Title	
Business Address		Business Address	

**WORK CONTACT NUMBER - Please use area code first followed by the number**

☎ Work		☎ Work	
☎ Fax		☎ Fax	
Email @ Work		Email @ Work	

**SCHOOL FEES COMMITMENT FORM AND PAYMENT DETAILS**

**FINANCIAL DETAILS OF PERSON RESPONSIBLE FOR ACCOUNT**

Title		Surname	
Initials		First Name	
ID Number			

**Please use area code first followed by the number**

☎ Home		☎ Work	
☎ Cell		☎ Fax	
E-mail			
Bank		Branch code	
Branch		Account number	
<b>Method of payment</b> ✓ one option ONLY		Cash	
		Cheque	
		Debit order	
		Credit Card	
		EFT	
<b>Please indicate if you will require a debit authorisation form</b>			YES/NO



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**LEARNER INFORMATION**

Surname					Initial							
First Name/s			Sex: ("X" one)		Male			Female				
Home Language			Date of Birth		d	d	m	m	y	y	y	y
ID (SA)			Residents Permit No.									
Immigrant country of origin			Immigrant date of entry in SA		d	d	m	m	y	y	y	y
Race (GDE requirement)		African		Asian		Coloured		White		Other		
LEARNERS ADDRESS:				Learner living with:		BIOLOGICAL MOTHER		BIOLOGICAL FATHER		GUARDIAN		
				Position in Family		Out Of						

**Brother/sister CURRENTLY attending Bryanston Primary School**

First Name	Surname	Grade

**Brother/sister CURRENTLY attending another School**

First Name	Surname	Name of School	Grade

**LEARNERS HEALTH & MEDICAL CONDITIONS**

Please note that legal documentation of all medical conditions, allergies, and medication outlined below needs to be made available to the school as part of the application package.

**HAS THE LEARNER EVER HAD ANY OF THE FOLLOWING CONDITIONS? (✓ all that apply)**

<input type="checkbox"/>	HEART MURMUR	<input type="checkbox"/>	ASTHMA	<input type="checkbox"/>	ULCERS	<input type="checkbox"/>	TUBERCULOSIS	
<input type="checkbox"/>	EPILEPSY	<input type="checkbox"/>	BLACKOUTS	<input type="checkbox"/>	ANXIETY ATTACKS	<input type="checkbox"/>	DEPRESSION	
<input type="checkbox"/>	HEARING PROBLEMS	<input type="checkbox"/>	ADD/ADDHD	<input type="checkbox"/>	DIABETES	<input type="checkbox"/>	GLASSES	
<input type="checkbox"/>	BLOOD PRESSURE HI/LO	<input type="checkbox"/>						ADDITIONAL:

**Please list all allergies the learner might have:**

Has the learner had any illness, disability, accident, or psychological disorder which required special hospitalisation in the past five years? Yes No

Has the learner ever been a victim of, or personally witnessed a serious trauma, such as a murder or violent crime? Yes No

**CHRONIC MEDICATION:** please list the medication you learner takes regularly, the time and the dosage

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**EMERGENCY CONTACT DETAILS - NOT THE MOTHER & FATHER'S TELEPHONE NUMBERS**

Title		Surname		Relation:
Initials		First Name		

*Please use area code first followed by the number*

☎ Home		☎ Work	
☎ Cell		☎ Fax	

**MEDICAL AID DETAILS**

Medical Aid		Number											
Medical Aid Plan		Main Member											
Membership Start Date	d	d	m	m	y	y	Membership Expiry Date	d	d	m	m	y	y
☎ Medical Aid													
Preferred Hospital Name			Please ✓ Private or State:		Private		State						

**FAMILY DOCTOR DETAILS**

Surname		First Name	
Tel nr.		Fax nr.	

**EXTRAMURAL ACTIVITIES, EXCURSIONS AND TOURS**

The following extramural activities are offered by the school: (✓ those that your learner would like to participate in)

Athletics		Gymnastics		Tennis	
Chess		Netball		Art (Beginner to advanced)	
Cricket		Rugby		Computer Club	
Cross Country		Soccer		Drama	
Hockey		Swimming		School Choir	

**INDEMNITY FORM FOR EXTRAMURAL ACTIVITIES**

I, the undersigned, \_\_\_\_\_ (**full names and surname of parent/guardian**), being \*the parent/guardian of, or person responsible for, \_\_\_\_\_ (**full names and surname of learner**), hereby consent to the participation of my \*son/daughter in all games, matches, sporting, cultural and educational tours, trips and educational excursions arranged by the school and/or conducted under its aegis. Whilst it is recognised that the school will take every precaution to ensure the safety and wellbeing of my \*son/daughter, I hereby indemnify and hold blameless the Governing Body of the school, staff and other agents, against all claims which may arise in consequence of the death of or any injury sustained by my \*son/daughter during the course of such games, matches, sporting, cultural and educational tours, trips and educational excursions, from whatsoever cause arising, including any fault of whatsoever nature attributable to the school, its Governing Body, staff and other agents, save that liability shall not be excluded under this indemnity for loss occasioned by a deliberate act of wilful misconduct attributable to the school, its Governing Body, staff and other agents. In the event of my \*son/daughter being injured I hereby authorise the school, staff and other agents to procure such medical treatment/surgery as may in its/their absolute discretion be deemed necessary. I undertake to indemnify the school, Governing Body, staff and other agents from all medical and hospital costs occasioned thereby. I, by my signature hereto, acknowledge that I am \*parent/guardian of, or person responsible for: \_\_\_\_\_ (**full names and surname of learner**) and that I have read and fully understand the terms of this Indemnity.

Signed by Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



## **ADMISSION 2018 – LEARNER INFORMATION FORM**

### **DOCUMENTATION**

- **PLEASE SUPPLY CERTIFIED COPIES OF ALL DOCUMENTS.** We will **ONLY** accept **FULLY COMPLETED ORIGINAL** application forms. **NB - If the required information is incorrect, incomplete, or documentation is missing, the application will not be accepted.**

	School Report (latest one available) CERTIFIED COPY
	<u>Un</u> abridged Birth Certificate CERTIFIED COPY
	Immunisation Card CERTIFIED COPY
	<b>Home Owners</b> - Proof of both parents and child's residence address (Water and lights acc or Eskom bill only)
	<b>Renting Property</b> - Proof of Rental Agreement if renting property+ Statement (If renting from a friend or relative full affidavit by the owner, ID and water bill.
	Proof of BOTH PARENTS' work address
	If self employed, CK/CC DOCUMENTION
	ID Document (Biological Father/Guardian) CERTIFIED COPY
	ID Document (Biological Mother/Guardian) CERTIFIED COPY
	Work Permit (Immigrants) ORIGINAL
	Study Permit (Immigrants) ORIGINAL
	Residency Permit (Immigrants) ORIGINAL
	Where the parent is not the natural parent of the child, documentation supporting the parent's legal relationship with the learner. (Legal guardianship documents obtained from Department of Social Development or High Court.
	Where parents are divorced, divorce decree CERTIFIED COPY
	<b>2 x <u>Colour</u> ID or Passport Photo's only, of the learner. NO OTHER PHOTO'S</b>
	Medical notes/Prescriptions (Chronic Illness) Only if applicable
	Any assessments done on a learner e.g. Psychologists reports. Only if applicable.
	Transfer Card from previous school. Only once child has been accepted

### **IMPORTANT POINTS TO CONSIDER**

- Bryanston Primary School is a **Fee Paying** school.
- We charge fees to keep pupil-teacher ratios low and to provide additional facilities.
- We are a Co-Ed, English school; Afrikaans is the First Additional Language. No African languages are currently offered.
- Receiving a waiting list number does **not** guarantee a place in our school.
- If your form is incomplete, or any supporting documentation is missing, you will **not** get a waiting list number, but will instead be asked to return once the missing are remedied and re-join the back of the queue
- If you move outside our area between now and when school starts next year, you will be moved to the "B" waiting list.
- An "offer to purchase" is not suitable as proof of residence
- We will **ONLY** accept **FULLY COMPLETED ORIGINAL** application forms. **NB - If the required information is incorrect, incomplete, or documentation is missing, the application will not be accepted.**
- Attending a nearby pre-primary school does not guarantee automatic entrance.
- Siblings are not guaranteed a place if you now live outside our area
- **If, during our post-application verification process (which includes random visits), we discover that any of the information/documentation you provided is fraudulent, your application will be removed and the Gauteng Department of Education notified.**
- Please note that only on submission of a duly completed and properly signed application document to Bryanston Primary School (BPS) will you be provided with a written response indicating your application number.
- In order for the Admissions Committee to expedite this application it is vital that you read through this form carefully, provide all of the information and certificates required, and return the application form from **2<sup>nd</sup> May 2017 to 12<sup>th</sup> June 2017.**



## **ADMISSION AGREEMENT**

### **AGREEMENT**

Made and entered into between  
**BRYANSTON PRIMARY SCHOOL**

(Hereinafter represented by THE GOVERNING BODY and hereinafter referred to as "The School")

And

\_\_\_\_\_  
(Hereinafter referred to as "The Parent/The Guardian")

Whereas "The Guardian" has read the School Code of Conduct and declares himself/herself to be fully conversant therewith, and whereas "The School" has undertaken to provide the learner with a good and sound education.

### **THE PARTIES AGREE AS FOLLOWS:**

#### **1) LOCUS STANDI**

The Guardian warrants and undertakes that he/she is the parent/ legal guardian of the learner in respect of whom the enrolment form applies and hereby warrants that the particulars therein contained are true and correct.

Signed by Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

#### **2) COMPULSORY SCHOOL FEES / ENROLMENT / LEAVING**

- a) Bryanston Primary School is a Fee Paying Section 21 School, and as such, The School will set an annual compulsory school fee which it will collect from ALL parents/Guardian during the course of the year. By choosing to send his/her child to Bryanston Primary School, as opposed to a "Fee Free" school, the parent undertakes a commitment to pay ALL school fees owing to The School during the learner's tenure at Bryanston Primary School.
- b) The Parent/Guardian undertakes to pay compulsory school fees as may be determined by The School from time to time in terms of the South African Schools Act.
- c) The PARENT/Guardian undertakes 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, in which the learner participates from time to time.
- d) The Parent/Guardian undertakes, where requested by The School, to pay for all school excursions and activities, which may be organised by the School or its duly authorised representative, in which the learner participates from time to time.
- e) The Parent/Guardian undertakes and agrees to pay all fees as provided for in paragraph 2 (a), in accordance with the method of payment schedule completed and agreed to by The Parent/ Guardian, which schedule forms part of this agreement.
- f) In the unfortunate and unlikely event of the learner wilfully causing damage or loss to the property of the School, The Parent/Guardian agrees, and undertakes to compensate The School for such losses or damage.
- g) **ALL NEW LEARNER HAVE TO PAY AN ACCEPTANCE DEPOSIT OF R3000.00 PAYABLE WITHIN 10 (TEN) WORKING DAYS FROM THE NOTIFICATION LETTER OF ACCEPTANCE HAS BEEN RECEIVED.(fee only payable after approved acceptance letter has been received)** This fee will be credited towards your school fee account.
- h) **GRADE ONE ONLY: ADDITIONAL COMPULSORY NON REFUNDABLE R1250.00 IS TO BE PAID WITHIN 10 (TEN) WORKING DAYS OF NOTIFICATION OF THIS APPLICATION BEING APPROVED. This is for compulsory learner requirements, Workbooks, Annual Yearbook, School back pack, School pencil case, Outing costs and transport for the busses, Entry fees into the venues visited, any shows arranged for the children at the school) for 2018; this does not form part of school fees and does not include stationary or school uniform.**
- i) Bryanston Primary School is a full fee paying school. School fees are payable in advance on the first day of each month, preferably by means of debit order.
- j) School fees are the current fees and only serve as a guideline as the next year's fees will be confirmed by way of voting by the current parents at the Annual General Meeting in October 2015.
- k) Please note that learners go on tour and day outings during the year, this is a privilege, not a right, and they are only entitled to go on these trips if their school fee account is up-to-date and their behaviour record is satisfactory. These outings/trips are voluntary. If there is a query that needs to be addressed, please be considerate and do not leave it to the week before the tour / day outing to solve it.
- l) **A full term's notice, in writing**, or the equivalent fee in lieu thereof is required prior to the withdrawal of a learner.
- m) **FEES TO BE PAID AUTOMATICALLY WITHOUT REMINDERS**

Signed by Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_



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### 3) INDEMNITY

- a) The School undertakes to take all reasonable precautions to ensure the safety and well-being of the learner.
- b) Without The Guardian waiving any rights which he/she may have against the School in terms of clause 3 (a) above, The Guardian acknowledges and agrees to exempt the School, its employees, agents and representatives from any claims which The Guardian or learner other than those caused through negligence on behalf of the School or its employees.
- c) The Guardian furthermore indemnifies The School against any claim which may be brought against it arising out of any act of omission perpetrated by the learner against any third party, or property of any third person.

### COMPLIANCE WITH LAWS

- a) In addition to acknowledging that the parties are, by law, bound at all times by the provisions of the South African Schools Act and regulations thereto, the Guardian undertakes to comply with all rules and regulations as contained in the Code of Conduct as amended from time to time as well as any other rule determined by the School from time to time.
- b) The Guardian shall have the right to inspect the Code of Conduct by prior arrangement with the School, during normal school hours.

### 4) NON-VARIATION

- a) This agreement shall constitute the entire contract between the parties, who by their signature hereto, acknowledge that no representations have been made or warranties given or conditions stipulated, save out in this agreement.
- b) Save for the parties retaining the right to vary or alter the Code of Conduct from time to time as they may be permitted to in terms thereof, no variation, alteration, amendment or addition to this agreement shall be of any force or effect unless reduced to writing and signed by the parties hereto.

### 5) DOMICILIUM CITANDI ET EXECUTANDI CLAUSE (POSTAL ADDRESS INCURRNT USE)

The Guardian chooses his/her domicilium citandi et executandi, the address appearing on the enrolment form as: (Address you wish to use as postal address)

\_\_\_\_\_  
\_\_\_\_\_

In the event of a change of address and telephone numbers, parents are to notify the school in writing.

### 6) PRINCIPAL'S REGULATIONS

- a) Absence at beginning and end of term. Permission to be absent for a period at the beginning or the end of term, will not be given merely to facilitate holiday arrangements. Where overseas travel is concerned, the principal should be consulted three (3) months prior to the confirmation of such arrangements. Absence without permission will be treated as a serious offence.
- b) School matches are compulsory. Although care will be taken by the various authorities to adhere to the published programme, this will not always be possible. The fact that the normal programme has been changed is no excuse for non-attendance.
- c) Parents are asked to understand that participation in extramural activities takes precedence over any external club. It is expected that learners will be available for selection if required.

### 7) CODE OF CONDUCT

- a) The School subscribes to a Code of Conduct which deals with general behaviour, dress and grooming, substance abuse, disciplinary procedures and sanctions for contravening the Code. Completion of this application form expressly implies acceptance of and willingness of the parent, guardian or responsible person and the prospective learner to be bound by the Code of Conduct.
- b) 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.
- c) 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.
- d) Except in cases of illness, learners may not be absent from school or from matches, or from other compulsory school activities without permission being obtained beforehand from the principal, or relevant teacher in charge.
- e) The principal reserves the right, at his absolute discretion, to sanction learners for sub-standard work or any inappropriate behaviour which is a breach of these regulations, or which in any way is likely to bring discredit to the school.
- f) The principal expressly reserves the right to "detain" learners for misconduct or bad work without necessarily giving notice to parents.
- g) **The principal and staff are in loco parentis (up to one (1) hour after any official school function) for all learners here at the school: the exact interpretation of this phrase in an emergency must be at the discretion of the principal who will consult parents where, in his opinion, this is possible.** (No learners to be at the school gate after 17h00 except when the learner is in aftercare)

### UNDERTAKING BY PARENT/ GUARDIAN OR PERSON RESPONSIBLE

Consequent upon the acceptance by me of the offer of enrolment of the above learner applicant in Grade \_\_\_\_ with effect from \_\_\_\_\_, and having read and understood the rules and regulations set out above, I \_\_\_\_\_ (full name, please print) hereby undertake to abide by such rules and regulations.



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I, the undersigned parent/guardian or person responsible:

- Subscribe to the Bryanston Primary School Code of Conduct.
- Declare that the particulars contained in this entire application are true and correct.
- Understand that any false or incomplete information may constitute grounds for immediate rejection.
- Understand that a member of the School Governing Body will investigate all information in this application for the purpose of ensuring that all details, as stated, are true and correct, and that the parents and the learner may be visited at the stated home address appearing on the enrolment form.
- 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.
- Agree unconditionally with ALL conditions concerning fees and governance concerning this application.

**PARENT 1/GUARDIAN 1**

FULL NAME \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_

**PARENT 2/GUARDIAN 2**

FULL NAME \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_

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**Acceptance-Outcomes**

Letters will be emailed to all "A" List parents informing them of the application been successful or unsuccessful by no later than 28<sup>TH</sup> July 2017.

**This application must be hand delivered in person to the admissions officer from 2<sup>nd</sup> May 2017 – 12<sup>th</sup> June 2017**





**SOUTH AFRICAN SCHOOLS ACT, NO. 84 OF 1996**

**REGULATIONS FOR THE EXEMPTION OF PARENTS FROM PAYMENT OF SCHOOL FEES**

**CHECKLIST FORM \***

(Mark with a cross in the applicable box.)

1.	Has the principal informed you about the amount of the Annual school fees to be paid?	YES	NO
2.	Has the principal informed you that you are liable for the payment of school fees unless you are totally exempted from paying school fees?	YES	NO
3.	Has the principal informed you of your right to apply for exemption from paying school fees?	YES	NO
4.	Do you wish to apply for such an exemption?	YES	NO
5.	Do you wish to be assisted in making such application?	YES	NO
6.	Has the principal provided you with an application form (Annexure B), for exemption?	YES	NO

\_\_\_\_\_  
Signature of Principal  
Mr. L Botha

\_\_\_\_\_  
Name of Parent

\_\_\_\_\_  
Signature of Parent

Date: \_\_\_\_\_

Date: \_\_\_\_\_