Royal Schools

PLEASE INDICATE WHICH SCHOOL YOU ARE APPLYING FOR:

- ☐ **Royal Schools Alberton** - Cnr. JG Strijdom & Kliprivier Drive, Albertsdal
- ☐ **Royal Schools Princess Park** - 614 Pretorius St, Arcadia, Pretoria
- ☐ **Royal Schools Queens Private** - 310 WF Nkomo St, Pretoria West
- ☐ **Royal Schools Sky City** - Cnr. Lemon Shark & Kingfish Street, Watervalspruit
- ☐ **Royal Schools Starlight Academy** - Cnr Prince George Drive & 8th Avenue, Grassy Park, Cape Town

APPLICATION FOR ADMISSION

Grade: ☐☐

Year: ☐☐☐☐

DOCUMENTS / INFORMATION REQUIRED

Copy of birth certificate/ID document		Proof of household income/salary advise X 1 month	
Copy of study permit/asylum permit/refugee permit (if foreign) **Date of expiry:** _____		Completed and signed school fee clearance certificate from previous school	
Copy of learner's latest progress report		3X months latest bank statements	
Copy of learner's final progress report (once available)		Proof of residence	
Transfer document (once the learner has been accepted)		Copy of medical aid (front and back)	
Copy of learner's vaccination record (Pre-primary and foundation phase learners)		Two recent colour photos of the learner (ID size) (Please do not email these but submit at the school)	
Copy of parent's/legal guardian's ID document		Completed debit order form (if required)	
Learner Admission Contract (LAC) Compulsory		Proof of registration fee payment **(non-refundable)**	

A.) LEARNER DETAILS

Admin number _____
Surname _____
First names _____
(in full) _____
Name to be called _____
ID/Passport no. _____
Expiry Date _____
Learner cell no. _____
Gender Male Female ___
Study permit application Currently in progress | Need to apply

Grade and class _____
Home language _____
Religion _____
Country of birth (if not SA) _____
Ethnic group ○Black ○Indian ○White ○Coloured ○Asian

Signature - Father _____
Signature - Mother _____

Means of transport to/from school: Motor vehicle ☐ Bus ☐ Taxi ☐ Walk ☐

B.) LEARNER'S EDUCATIONAL DETAILS

Current school: _____ Previous school: _____

Type of school: ○Public/Ordinary ○Private ○LSEN

Telephone no: (current school) _____ Telephone no: (previous school) _____

Last grade passed: _____ Year: _____ Grade/s repeated: (if any) _____

Has admission to any other school/s ever been refused? If yes, please state reason. _____

Have you as parent/guardian been called to school for discipline issues? If yes, please state reason _____

Does the learner have any special educational needs or require additional learning support? ○Yes ○No

If yes, please provide details: _____

C.) FAMILY DETAILS

Father / Guardian

Surname _____
First names _____
Postal address _____
Postal code ☐☐☐☐
Business Name _____
Occupation _____
Public or Private sector _____
Work address _____
Suburb & City _____ Postal code ☐☐☐☐

Title _____ Initials ☐☐☐☐
ID/Passport number _____
Home address _____
Suburb & City _____ Postal code ☐☐☐☐
Phone: Home _____
Work _____
Cell _____
Email address _____
Relation to learner _____

Mother / Guardian

Surname _____
First names _____
Postal address _____
Postal code ☐☐☐☐
Business Name _____
Occupation _____
Public or Private sector _____
Work address _____
Suburb & City _____ Postal code ☐☐☐☐

Title _____ Initials ☐☐☐☐
ID/Passport number _____
Home address _____
Suburb & City _____ Postal code ☐☐☐☐
Phone: Home _____
Work _____
Cell _____
Email address _____
Relation to learner _____

Father / Guardian signature _____ **Mother / Guardian signature** _____

D.) PERSON RESPONSIBLE FOR ACCOUNT

Please note that parents will be held jointly and severally liable for the account, even if the account is paid by a third party / bursar.

Surname		ID/Passport number	
First names		Title	Initials
Occupation		Home address	
Business Name		Suburb & City	
Public or Private sector			Postal code
Postal address		Phone: Home	
		Work	
Work address		Cell	
		Email address	
Suburb & City		Signature	

E.) LEARNER MEDICAL INFORMATION

Medical aid: _____

Medical aid number: _____

Main member name: _____

Main member ID no: _____

Main member postal address: _____

_____ Postal code

Main member email address: _____

Main member cell number: _____ Main member work number: _____

Signature: _____ **Date:** _____

Main Member of Medical Aid

HAS THE LEARNER EVER HAD ANY OF THE FOLLOWING DISEASES?

German measles		Mumps	
Measles		Diphtheria	
Chicken pox		COVID -19	

HAS THE LEARNER EVER BEEN TREATED FOR THE FOLLOWING?

TB		Ulcer	
Asthma		Migraine	
Diabetes		Tonsils	
Epilepsy		Heart disease	

IS THE LEARNER ON ANY CHRONIC MEDICATION? PLEASE SPECIFY

DOES THE LEARNER HAVE ANY ALLERGIES? PLEASE SPECIFY

HAS THE LEARNER EVER HAD ANY OPERATIONS? PLEASE SPECIFY

PLEASE SUBMIT A COPY OF YOUR MEDICAL AID CARD (FRONT AND BACK)

F.) DETAILS OF ANY OTHER CONTACT IN THE CASE OF AN EMERGENCY (OTHER THAN IN SECTION C AND D)

Surname: _____ Full names: _____

Relation to learner: _____

Tel (h): _____ Tel (w): _____ Cell: _____

Email address (please write legibly): _____

_____

Initials _____

G.) BROTHERS AND SISTERS

Name	Date of Birth	Age	Grade	Name of current School or Institution
1				
2				
3				

H.) MARITAL STATUS OF PARENTS

Married ☐ Divorced/Separated ☐ Married but live apart ☐ If Divorced/Separated - Children in custody of

Widow ☐ Widower ☐ Single ☐ Mother ☐ Father ☐ or Both ☐

I.) AGREEMENT BETWEEN ROYAL SCHOOLS AND THE UNDERSIGNED

Declaration and Undertaking
I declare that the particulars furnished on this form are true and correct, and I undertake to comply with the rules, regulations and decisions of the school, and any amendments thereto, which may be applicable to students and parents in general. I declare that I have perused the applicable school rules and policies and understand the contents thereof and accept it as binding on myself and the learner concerned.

School Fees
I have taken note of the school fees as published on www.royalschools.co.za and available from the school office. I have read, understood and accept the financial policy of the school. I accept full responsibility for all amounts due to the school and I agree to pay the school fees strictly according to due dates, failing which I am aware that the account may be handed over to debt collectors and that I will be liable for the related costs. I am aware that my child(ren) will not be re-registered for the next year should I have an outstanding balance. Furthermore I am aware that the school also reserves the right to charge interest on all overdue accounts at a rate of 1% per month and that should school fees be in arrears, the school reserves the right to deny learners access to aftercare, transport, trips and outings and school functions. I am aware that school fees are payable annually in advance, but can be paid in monthly or quarterly instalments as published, but that should the monthly or quarterly payment be in arrears, the total fees for the year will immediately become payable. I am aware that the school reserves the right to not accept a registration on the basis of affordability, academic and disciplinary record and incomplete application and that the school reserves the right to request upfront payment of the January school fees to reserve a space for the following academic year. Take note that the registration fees are non-refundable.

Photos, Videos & Media Consent
I grant permission for my child(ren) to be photographed, filmed, or recorded during school, sporting, cultural, and promotional activities, for use on the school's website, social media, newsletters, and marketing materials. No payment will be made to myself or my child(ren) for this use. I understand I may withdraw this consent at any time by notifying the school in writing.

Indemnity
I hereby give permission that he/she may attend any excursion organised by the school with the permission of the principal. I understand that he/she will sometimes have to travel by bus or taxi to different venues of educational value. These trips will have to be paid for when organised. The school will use the best transport available at the best value for money. I accept that the school will take the necessary precautions to ensure the safety of my child. I will however, not hold the school responsible in case of an accident, loss of limb or life, or any other damages her/his person or property. I also understand that this arrangement is necessary because it is not always flexible for parents to sign a letter of consent before a trip can take place.

Royal Schools Values
I undertake to uphold the values of Royal Schools whenever I am involved in school related functions or activities. I will also be available to attend parents meetings and functions to support the education of my child. I will respond timeously to communication received from the School. I undertake to keep all personal contact details updated at all times. I undertake to keep all personal contact details updated at all times.

The Protection of Personal Information Act (POPIA)
The Protection of Personal Information Act (POPIA) is enforced from the 1st of July 2021 and Royal Schools requires your consent to store and process the Parent, Legal Guardian and Child's personal information. By completing this application form and submission of the necessary supporting documents you are consenting that: Royals Schools may process your and the child's personal information for the purposes of processing this application for admission to Royal Schools; Royals Schools may request and process information from your child's current/previous school in order to process this application and that Royal Schools may proceed with enquiries that are necessary to verify any information provided in the application documentation, including verification of credit ratings. Royal Schools is dedicated to protecting the privacy of all whose personal information we hold in our possession. Royal Schools are committed to use all personal information in accordance with POPIA. Royal Schools will only process personal information as per POPIA guidelines, and confirm that we will not sell or share personal information for economic purposes. Should this application not be successful or withdrawn, all information included in this application will be destroyed as per POPIA regulations and Royals Schools Policy.

Suspension or Termination of Admission
The admission of the Learner as a learner at the School may be terminated in accordance with any one or more of the following sub-paragraphs, subject however, always to any relevant provisions of the Schools Act – by the Parents giving at least a complete School Term's notice to that effect to the School Head (the notice must be given before the commencement of the last School Term during which the Learner is to attend the School).

School Code of Conduct
We, the undersigned parents/guardians, acknowledge and agree to uphold the School's Code of Conduct. We commit to supporting the school in maintaining a safe, respectful, and disciplined environment, and we understand that adherence to these standards is essential for the well-being and academic success of all students.

Social Emotional Support Services
We, the undersigned parents/guardians, hereby consent to our child's participation in the School's socio-emotional support services. We understand that these services are designed to promote emotional well-being, resilience, and positive social development, and we agree to cooperate with the school in fostering a supportive environment for our child's growth.

Royal Schools hereby undertakes to offer quality teaching and related services of a high standard to the best of our ability.

Thus signed on this _____ day of _____ 20_____

_____
Account holder

_____ Father / Legal Guardian

_____ Mother / Legal Guardian

_____ o.b.o. Royal Schools

Please note that registration is only confirmed when the application has been authorised by the Principal.

J.) MARKETING SOURCE

Please indicate where you heard about our school

Social media ☐ Open Days ☐ Google ☐ Flyers ☐ School Signage ☐ Info Boards ☐

Word of mouth ☐ If other, please spesify: _____

_____

K. ANNUAL HOUSEHOLD INCOME BEFORE TAX

Less than R350 000	R350 001- R650 000	R650 001- R950 000	R950 001 +
☐	☐	☐	☐

OFFICE USE

AUTHORISED BY

Signature

STUDENT NUMBER_____ **GR**_____

ACCEPTED ☐ **REJECTED** ☐

AMOUNT PAID

Receipt Number

R

DATE NOTIFIED_____

I am aware that a fee of R160 will be charged for the credit check should my application be declined.

Initials _____

CONSENT FOR CREDIT CHECK

Royal Schools is affiliated to TPN Credit Bureau, a registered credit bureau. All account payment profiles, patterns and behaviour is recorded monthly with the credit bureau for the purposes as per the National Credit Act.

CONSENT CLAUSE: (Future debtor)
Application form and/or Contractual Agreement

The debtor consents to and authorises Royal Schools, the supplier, service and/or credit provider, as the case may be, to:

a) contact, request and obtain information at any time from any supplier/ service provider (or potential credit provider) or registered credit bureau in order to assess the behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of the debtor; and

b) provide information about the behaviour, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of the debtor to any registered credit bureau or to any supplier, service or credit provider (or potential credit provider) seeking a trade reference regarding the debtor's dealings with the supplier, service and/or credit provider.

Full names of person responsible for the account: _____

_____

Relation to the learner: _____

Signature: _____ **Date:** _____