

PARTICULARS OF PARENT/ SPONSOR/ GUARDIAN/ COMPANY RESPONSIBLE FOR PAYMENT OF LEARNER'S FEES

Full Name: OR Full Company Name:
 ID Number: OR Company Registration no:
 Relationship of sponsor to learner:
 Physical address:
 Contacts
 Home phone: Office Number: Cell phone no:

Signature:.....Date:.....Place:.....

YOUR CONTACT INFORMATION (Only student's contact information is required in this section)

Name of next of kin to contact in case of emergencies:.....

Next of kin's relationship to student:.....

DECLARATION FOR FOREIGN STUDENTS

Have you secured a study permit yet to study at **Crescent Academy**? Yes/No

If you have answered yes above, please give us your study permit no:.....

Expiry Date of the study permit: YYYY.....MM.....DD.....

SECTION F: TERMS AND CONDITIONS

The following terms and conditions of registration are agreed to:

ALL registration fees, admin fees and deposits are required up-front and non-refundable.

The student failure to attend classes for whatever reason shall not in any way entitle or her to a reduction in fees, nor will it absolve him/her or other signatories to this document from full liability for payment of fees and other charges.

No cancellation of this contract shall be effected without written consent thereto by principal of **CRESCENT ACADEMY**.

The right to attend classes and write exams is not transferable

The school has the right to create and apply rules, including due performance, the student hereby agrees to be bound by all such rules.

The school reserves the right to exclude the student from classes and examinations as it may be deemed necessary without in anyway detracting from the right of recovering the fees payable by the student to Crescent Academy and to withhold a student's examination results or to dismiss him/her for failing to pay all or part of required or failing to comply with any school rules or the terms of this contract.

The student and other signatories hereby agree to pay all tuition and other fees whenever they fall due to Crescent Academy without any further notice being issued. Should Crescent Academy legal action against a fees defaulter, the liability of all the costs involved will fall on the signatories to this contract other than Crescent Academy, jointly as well as severally.

Where tuition fees are payable to Crescent Academy in installments, the failure to pay any single installment in time will result in the full balance becoming immediately due and payable without further notice. Failure to do so will result into legal action taken against you.

The student failure to register or write examination for whatever reason shall in no way entitle him/her to any sort of reduction in tuition fees, nor will it absolve him/her from full liability for the payment of tuition fees due.

In addition to these terms of registration, the signatories further agree to abide by the Crescent Academy enrollment terms and conditions and the student's code of conduct which in line with Gauteng Department of Education and school's constitution.

Fraud cases including altering information on **DEPOSIT slips, exchanging fees card** are criminal cases and will be reported to the police and may lead to suspension/discontinuation of a learner from the school.

Declaration of oath to have read, understood and abide by the terms of registration as stipulated in the above.

I declare to the best of my knowledge, that the information I have provided is correct and I understand that any incorrect or misleading information will invalidate my application for registration or admission. I also undertake that, if admitted, I will abide by and fully conform to the rules and regulations as laid by the council of **CRESCENT ACADEMY**.

Applicant's signature:.....Date:.....Place:.....

Parent/ Guardian's signature:Date: Place:

CRESCENT ACADEMY

260 Johannesburg Road, La Rochelle
 Johannesburg South, 2190
 Republic of South Africa
 26 14'21,27"S; 28 03'19,03"E
 Elevation 1718m

011 436 9232
 078 935 7728
 083 989 6679

info@crescentacademy.co.za
 www.crescentacademy.co.za

Attach
Two ID photos



APPLICATION FOR ACADEMIC ADMISSION

The information requested on this form is being collected pursuant to the School Act, No. 84 of 1996. Information acquired through this form is kept secure and access is strictly restricted.

SECTION A: ADMINISTRATIVE INFORMATION

FOR OFFICE USE ONLY:

CHECKLIST FOR APPLICANTS

Please note that your application form cannot be processed if you have not attached all the relevant documents. Please use the checklist below to ensure that you have attached all the required documents before you submit your application form

- Proof of payment of your registration and admission fees.
- Certified copy of your ID document (ID document compulsory for SA citizens - your application cannot be processed without a certified copy of your ID. If you are still waiting for your ID, submit a certified copy of your birth certificate.)
- Certified copy of ID of parent / legal guardian / surety (required if you are a dependent, or currently at school or have left school recently and do/will not have permanent employment when applying or studying at the college)
- Certified copy of your report / statement of results and transfer letter.
- Certified copy of passport (for international students) / proof of permanent residency (SA ID)

Learner Grade

Grade R <input type="checkbox"/>	Grade 4 <input type="checkbox"/>	Grade 8 <input type="checkbox"/>	Grade 12 <input type="checkbox"/>
Grade 1 <input type="checkbox"/>	Grade 5 <input type="checkbox"/>	Grade 9 <input type="checkbox"/>	Re-write <input type="checkbox"/>
Grade 2 <input type="checkbox"/>	Grade 6 <input type="checkbox"/>	Grade 10 <input type="checkbox"/>	N3 Matric <input type="checkbox"/>
Grade 3 <input type="checkbox"/>	Grade 7 <input type="checkbox"/>	Grade 11 <input type="checkbox"/>	Adult Education <input type="checkbox"/>

How did you learn about Crescent Academy? TV Poster Flyer Newspaper Others

Grade enrolled for: Commencement Date:

Clearance:

Documents <input type="checkbox"/>	Registration <input type="checkbox"/>	School fees <input type="checkbox"/> <input type="checkbox"/>
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STUDENT NUMBER:

DATE REGISTERED:

Remarks:

Official date & Signature

SECTION B : STUDENT DETAILS

Surname:				Initials:			
First Name:				Other Names:			
Date Of Birth: YYYY	MM	DD	Gender:	Male:	Female:		
Race:	African	White:	Coloured:	Indian:	Other:		
Country of Residence:				Identification or Passport No:			
If SA, indicate province of residence:				Citizenship:			

Physical address:				Home Telephone:			
City/Suburb				Emergency Telephone:			
Code:	Learner Email Address:			Learner Cell:			
Home Language:		Preferred Language of Instruction					
Boarder	Yes	No	Mode of transport:				
Deceased Parent	Mother	Father	Both				
Religion:	For Grade 1 only: indicate pre-primary education			None	Non Formal	Formal	

Siblings

Number of other children in this school:	Position in the family (e.g. first):
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Please supply full names below:

Name:	Grade:
Name:	Grade:
Name:	Grade:
Name:	Grade:

SECTION C : MEDICAL AID INFORMATION

Learner Medical Information

Medical Aid Number:	Medical Aid Name:
Medical Aid Main Member:	
Doctor's Name:	Doctor's Telephone:
Doctor's Address:	
Medical Condition:	
Special Problems Requiring Counseling:	

DISABILITIES AND CHRONIC ILLNESSES

Do you have any disabilities or chronic illnesses that may require assistance? Yes/No

If yes, describe the nature of the disability or Chronic illnesses:.....

SECTION D: ACADEMIC INFORMATION

RECORD OF LEARNER'S PREVIOUS ACADEMIC ACHIEVEMENTS

Grade	Academic/ Sports/ Discipline	Year	Grade/ Level
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			

METHODS OF FEES PAYMENT

Registration Fee: R.....(Non-refundable) Admission Fee: R.....(Non-refundable)

Monthly Payment:

R..... No of Months Cash Payment R..... Debit Order R.....No of Months.....

Parent / Guardian Signature:

SECTION E : PARENT DETAILS

Parent / Guardian Information Complete a SEPARATE parent form for each parent living at a different physical address

Title:	Initials:	Surname:	First Name:
Home Language:		Gender: Male:	Female:
Identification Number:	Or Passport number	Account Payer: Yes	No
Race:	African	White:	Coloured: Indian: Other:
Residential Street Address:			
City/Suburb		Code:	
Occupation:	Employer:		
Surname of Spouse:	First Name:		
Occupation of Spouse:	Learner resides with his parent/s Yes No		
Spouse ID Number:	Relationship to Learner:		
Marital status of parent:			

Parent / Guardian's Declaration of agreement to pay fees according to the above charges

I..... ID no.(full names of person responsible for paying learner's school fees), hereby declare that I have fully understood the above fee charges specified in this contract document. I also agree to pay these in accordance with this agreement that I have concluded with the school. (Please NOTE that no changes can be made to this contract without a written consent from both the school and the person responsible for the learner's payments).