

BAYATHANDWA DAY CARE CENTRE CONTRACT

ENTERED INTO BETWEEN:

Full Name(s)	Nomsindisi Lucia Mbolekwa
Designation	Director
Physical Address	Dibinkonzo Village
	Ward 11
	Sterkspruit
	9762
Contact Details:	
Cell	082 421 9464
WhatsApp	082 421 9464
E-mail	luciambolekwa56@gmail.com

AND

NEXT OF KIN:

Full Name(s)	
Relationship	
Physical Address	
Contact Details:	
Cell	
WhatsApp (if applicable)	

1. ADMISSION PROCESS

This contract will begin on registration of the child and continue until terminated by both parties.

2. TARGET AGE

3 months to 5 years.

3. ADMISSION TIME

Any time of the year, according to the Parent / Guardian needs.

4. OPERATING DAYS, HOURS, MONTHS AND SCHOOL DAYS

- Monday to Friday from 06h00 to 18h00.
- The centre is opened from January to December.
- The child is admitted during any month of the year.
- There are no school holidays at the centre.

5. WEEKENDS, PUBLIC HOLIDAYS & SLEEP-IN

- Negotiable according to Parent / Guardian needs.
- Negotiations to start at least 3days before the need.
- To be discussed privately with the Director through a private WhatsApp message (not through the WhatsApp group).

6. PAYMENT OF FEES

- Registration fees are paid on admission of the child and continued every year.
- **Monthly school fees:** These are paid on admission of the child and continued on any of the following dates of each month: 30th, 31st, 01st, 15th, 20th, 26th.
- If the parent / guardian brings the child mid-month, there will be no exemption in the payment of the total amount of fees for that month.
- After admission, all monthly fees will be paid up to the end of the year.
- There will be no pause in the payment of monthly fees even if the parent / guardian feels like staying with the child at home before the end of the year due to personal reasons.
- No transport fees will be paid if the child is not using it.
- If the child was using transport and has to stop, the parent / guardian should immediately inform the Director.

7. SECURITY INFORMATION

- All employees have been screened by the DSD in Pretoria if their names do not appear in Part B of the National Child Protection Register (Section 126 (1) of the Children's Act 38 of 2005 and Regulation 44.
- All parents / Guardians should bring and collect their children.
- Any other designated person who will bring and collect the child should also be registered by the parent /guardian to avoid any stealing of children
- If there is an emergency and a child needs to be collected by somebody else either than the registered parent or guardian, the parent / guardian should immediately call and write an SMS using her/his cell phone to the Director (Mrs. N.L. Mbolekwa) at 0824219464 / 0794439996 stating the name and surname of the person who will be collecting the child. The person is required to bring his / her ID document.
- The centre premises are all protected by surveillance cameras, starting from the gate
- The centre has a Security Guard at the gate, to whom all visitors are required to sign the register when entering the centre premises. All visitors shall respect and adhere to the Security Guard's requests.
- No parent, guardian or any other person shall bribe the Security Guard concerning stealing of children they will suffer the consequences.
- Any parent that will dump the child and disappear will be dealt with in terms of the law.

8. HYGIENE INFORMATION

- All children are to have a pair of washing rags that will be kept at the centre.
- On admission, each child should bring one roll of 1ply twin saver toilet paper.
- Children on potty training should have at least 4 under pants / panties in case there is a need to change them.
- Enough pampers should be brought by the parents for the babies, especially in cases when the baby has diarrhoea.
- All children should have at least one pair of clothes in their school bags for changing if there is a need.
- The nails of children should be cut short by parents /guardians to prevent scratching and auto-infection.
- All children 2 5 years will be taught hand washing before meals and after using the sanitary establishment, and to be continued at home.

9. MEDICAL INFORMATION

- A consent form will be signed by the parent / guardian, allowing the centre to examine the child when necessary and allowing the child to get his / her immunizations that will be provided by the local clinic and school health services.
- Any medical problem detected during examination that may hinder the growth and development of a child or that needs special medical care, will be discussed with the parent.
- Any instructions from the doctor should also be explained at the centre.
- Any allergies from food, medication, environment or whatever should be disclosed at the centre

- Illnesses and/or any treatment the child is currently having, including instructions from the doctor, should be explained to the centre for continuity of care.
- The centre has to be informed of the family doctor, the medical aid of the child and number, should there be any emergency that needs a child to be taken to the doctor.

10. FEEDING INFORMATION

- No food should be brought to the centre by parents except for suitable milk formulas for the babies.
- Birthday cakes will be accepted according to the requests from parents.
- All children will be fed according to the centre menu and feeding schedule, and whenever necessary.
- No juice, snacks, fruit or any form of food will be brought by parents.

11. TERMINATION OF CONTRACT

- At 5 years of age after graduation.
- Before 5 years of age on movement of the child to another area.

12. GENERAL INFORMATION

- Communication will be through meetings, consultations, cell phone, WhatsApp with the Director and the WhatsApp group.
- Parents / Guardian are required to bring the child's clinic card containing the birth information, which will be extracted to assist in the growth and monitoring of the child.
- Parents / Guardian are required to bring the child's copy of the birth Certificate, which is needed by the Department of Education.
- All parents are required to attend meetings at the centre twice a year or whenever necessary, to share their views, feedback and ideas about the centre.
- Parents are also advised to use the suggestion box to improve the centre.

Compile By:	Date:
••••••	••••••
N.L. Mbolekwa (Director)	
Accepted By:	Date:
••••••	••••••
Parent / Guardian	



Admission Form

Child Information:	
Admission Date	
Physical Address	
Child's Surname and Name	
Nickname	
Date of Birth	
Gender	
Child's ID Number	
Disabilities	
Allergies: Food / Medicine / Environment	
Number of children staying with him / her at	
home	
Child receiving SASSA Grant	
(Tick what is applicable)	Yes / No
Medical Aid (If Applicable)	
Medical Aid Number	
Family Doctor	
Child to be transported by the centre	
(Tick what is applicable)	Yes / No
Next of kin Information:	
Surname and Name	
Relationship	
Contact Details	
Signature	
Date	



FINANCIAL IMPLICATIONS: 2024

Category	Amount
Registration Fees	R800.00
Monthly fees when a child still uses pampers	R750.00
Monthly fees when a child is not using pampers	R650.00
After Hour Service	R50.00 per hour
Week-ends & Public Holidays	R100.00 per day (Age: 4-5 years)
·	R150.00 per day (Age: 3-36 months)
Sleeping over when there is a serious problem:	R150.00 per night (Age: 4-5 years)
	R250.00 per night (Age: 3-36 months)
Payment of fees	Fees can be paid in cash or deposited /
	transferred to any of these two bank
	accounts:

Banking Details:

Bank	First National Bank	Bank	Capitec Bank
Branch	Sterkspruit	Branch	Sterkspruit
Branch Code	211220	Branch Code	470010
Account Number	62338350325	Account Number	1450318655
Account Holder	N.L.Mbolekwa	Account Holder	K.Ntabeni
		Cell	0794439996

Transport: From and to Home (*not Bus Stop***):**

Sterkspruit	R830.00	Naledi	R680.00
Zwelitsha	R830.00	Mbonisweni	R680.00
New Rest	R830.00	Herschel	R630.00
Tienbank	R830.00	Khiba	R680.00
Esilindini	R780.00	Witterbergen	R750.00
Bamboe	R730.00	Entsimekweni	R750.00
Bluegums	R630.00	Dibinkonzo	R430.00

Stationery needed: Age 2-5 years

Colouring Book
Flip file 30 pages
Wax Crayons
Old empty Ice Cream Container to store crayons at the centre

Age: 0-2 years

Own Milk Formula	
Own Pampers	



Consent Form

I,	
ID Number	being a parent / guardian hereby
give consent to	the centre that my child:
(Child's Name)	will be done physical
examination wh	en necessary at the centre and that she / he should be
	en due by the local clinic and school health care
services from D	sistrict Health Care Services.
•	e consent that my child may be taken by the centre to
the family	doctor mentioned in the admission form in cases of
emergency	•
- I agree to	the following:
•	that an ambulance may be summoned for my child if necessary in cases of emergency.
•	that my child may be taken by the centre transport in cases of emergency to the hospital if there is a delay with the ambulance.
•	that my child will be examined annually by the visiting Dentist.
Signature:	
Date:	