



I, _____ parent/guardian of _____
hereby confirm that:

My child will be returning to Little Light Academy in 2022	
My child will NOT be returning to Little Light Academy in 2022	

*Tick the relevant box

Fee Structure		Banking Details	
Registration Fee	: R 500.00	Account Name:	Little Light Academy
Babies (0-2Yrs)	: R1 400.00	Acc No.	: 62808 0289 07
Toddlers (3-6 Yrs)	: R1 200.00	Bank Name	: First National Bank
After Care	: R 550.00	Ref	: Child's Full Name
Development Levy:	R 650.00 (Stationery)		

STUDENT INFORMATION

Full Names	
Surname	
Preferred Name	
Date of Birth	
Gender	
ID Number	
Nationality	
Residential Address	
Allergies/Illnesses	
MEDICAL INFORMATION	
Allergies / Illnesses	
Family Doctor Name	
Family Doctor Number	

Medical Aid Name*	
Medical Aid Number	

PARENT INFORMATION			
	Father	Mother	Guardian
Name(s)			
Surname			
ID Number			
Residential Address <i>(if different from that of child)</i>			
Cell Number			
E-mail address			
Company			
Occupation			
Work Tel. No			
Work Address			
Religion			
MISCELANEOUS			
	Name	Number	E-mail
Person to be notified in case of emergency			
Person Responsible for Child Drop off			
Person Responsible for Child Pick Up			

FINANCIAL AGREEMENT

In recognition of the acceptance of my child _____ (child's full name) into Little Light Academy during the academic year of _____, I do hereby agree to pay the following:

- An annual admission, registration and/or application fee (non-refundable and not offset against school fees) of R 350.00 payable with application.
- School Fees of R _____ per month payable in advance before the 3rd of each month. UNDER NO CIRCUMSTANCES WILL SCHOOL FEES BE REFUNDED
- Two Months' **WRITTEN NOTICE** of intention to remove your child from Little Light Academy, failure to submit notice, will deem fees liable to Little Light Academy.
- No discount will be given towards fees due to non-attendance of the child for whatever reason.
- School fees are payable for 12 months (January to December) before the 3rd of each month, interest of 3% will be charged daily on overdue accounts, unless prior arrangement has been made in writing.
- Outstanding fees are subject to collection fees

Operating Hours : Monday to Friday 06H00 – 18H00

I _____ of ID Number _____ who will be responsible for maintaining this account hereby agree to all the above as stated by Little Light Academy.

Signed as follows _____ on this ____ day of _____ 20__ .

FOR OFFICE USE ONLY:

Name : _____

Signature: _____

Date: _____

Marketing Consent Form

***By law a child's image may not be utilised for whatever reason without the consent of the child's parent or legal guardian. As such we as Little Light Academy are requesting all our parents to complete the form below and have it sent back to us.*

I, _____, parent of, _____
hereby agree / decline (circle preference) to the use of my child's image on the
organizations social media platforms, website and any other platforms as may be
deemed fit in association with Little Light Academy.

I agree to do so without any expectation of compensation regardless of any
sponsorship or referrals that may be obtained due to the inclusion of the image.

Name of Parent: _____

Signature: _____

Date: _____