



HILLSIDE
PRE-SCHOOL

Hillside Pre - School Application Form

Child's Information:

1	First name/s	
2	Surname	
3	Date of birth	
4	Age	
5	Gender	

Parent/Guardian Information:

1	First name/s	
2	Surname	
3	Contact no.	
4	Email	
5	Home address	

Emergency Contact Information:

1	Name	
2	Contact no.	
3	Relationship	

Medical Information:

1	Medical conditions – if any	
2	Allergy/ies – if any	
3	Medication/s – if any	

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Family Composition:

1	Family ranking: 1 st , 2 nd , etc	
2	Is the child an only child? (Yes/No)	
3	Number of siblings	
4	Age/s of siblings	
5	Relationship/s (full/half/step)	

Essential Admission Criteria:

1. Your child/ren must be at least 3 years old and turning not older than 5 years old during the academic year.
2. Children must be fully potty trained and able to use the bathroom independently.
3. Birth certificate: A certified copy of the child's birth certificate.
4. Proof of Residence (utility bill or lease agreement).
5. Parent/Guardian ID (driver's license or passport).
6. Proof of Payment – Registration Fee: R500 (non-refundable).

Fee Structure:

- **Registration Fee:** R500 (non-refundable). Secures enrolment and covers administrative costs and educational resources. See banking details below.
- **Monthly Fee:** payable over 11 months @ R1850.00 per month, January to November. Late enrolments will pay R1850.00 per month from the month of acceptance/registration up to and including November.
- **Termly Fee:** payable before the start of each of the 4 terms @ R5087.50 per term.
- **Annual Fee:** this payment option qualifies for a (one-month) discount, subject to receipt of payment on or before 31st January (net total amount of R18 500.00).
- **Sibling discount:** Families enrolling multiple children receive a 5% discount on the fees for the second child.

Payment Terms:

- Fees payable on or before the 1st of each Month or Term
- Late payment fee: R100 plus interest on any outstanding amount
- Fees are payable: Monthly, Termly or Annual

BANK ACCOUNT: Hillside Education Academy
BANK: Standard Bank **BRANCH CODE:** 051001
ACCOUNT NO: 10186952722

Authorization: I authorize Hillside Education Academy to:

1. Provide medical treatment in case of emergency.
2. Take photographs/videos for educational purposes.
3. Share information with relevant authorities.

By signing below, I acknowledge that I have:

1. Read and understood the rules, regulations, and policies of Hillside Education Academy.
2. Agreed to comply with and support the school's goals and objectives.
3. Committed to working collaboratively with the school to ensure the best interest and development of my child.

Signature: _____

Date: _____

Name & Surname (PRINTED): _____