



BLOUBERGRANT PRE-PRIMARY SCHOOL

4 CURLEWIS ROAD
BLOUBERGRANT 7441

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PHONE (021) 557-5500

APPLICATION FORM

Proposed year of entry _____ BOY/GIRL _____

FULL NAME AND SURNAME OF CHILD _____

DATE OF BIRTH: _____ DENOMINATION: _____

DOES YOUR CHILD ATTEND A PLAYGROUP? YES/NO WHERE: _____

AFTER-SCHOOL CARE REQUIRED UNTILL: 15H00 YES/NO 18H00 YES/NO

HOME LANGUAGE: _____ HOME TEL NO: _____

ADDRESS: _____

FATHER: _____ OCCUPATION: _____

PLACE OF EMPLOYMENT: _____

CELL NO: _____ WORK NO: _____

EMAIL ADDRESS: _____

MOTHER: _____ OCCUPATION: _____

PLACE OF EMPLOYMENT: _____

CELL NO: _____ WORK NO: _____

EMAIL ADDRESS: _____

**A NON-REFUNDABLE APPLICATION FEE OF R150.00 AND BIRTH CERTIFICATE MUST ACCOMPANY THIS FORM.
A NON-REFUNDABLE REGISTRATION FEE OF R1500.00 IS PAYABLE IMMEDIATELY ON ACCEPTANCE OF YOUR
CHILD.**

A FULL QUARTER'S NOTICE IS REQUIRED WHEN WITHDRAWING YOUR CHILD FROM THE SCHOOL

SIGNATURE: _____ DATE OF APPLICATION: _____

FOR OFFICE USE ONLY

Date application form received: _____ Application Fee: R _____

Birth Certificate presented: _____ Non-Refundable Registration: _____

ACCOUNT NO: _____