



(Association Incorporated under Section 21)

Registration No: 96/09 156/08

# BRYANSTON GRADE 0

## APPLICATION FOR ADMISSION

### 2022

**Child's Name:** \_\_\_\_\_

*SUBMISSION OF APPLICATIONS TO PLEASE BE EMAILED TO [bryanstongrade0@triplex.co.za](mailto:bryanstongrade0@triplex.co.za)*

**Office Use Only**

Sibling	
All Docs	
Admin Fee	
Letter of Accept	
Deposit Paid	
Date issued	
Date returned	

**Telephone**  
**Contact**  
**Email**

011-4637926  
Wendy Bolle - Administrator  
[bryanstongrade0@triplex.co.za](mailto:bryanstongrade0@triplex.co.za)

# Application for Admission

## 2022

Child's Name: \_\_\_\_\_

PLEASE PRINT CLEARLY, USING A BLACK OR BLUE PEN

**DOCUMENTATION - PLEASE SUPPLY COPIES OF ALL DOCUMENTS (NO ORIGINALS)**

NB: The following must be submitted with the application, without any of these, your application will not be considered.

- 1 Learner's official Unabridged birth certificate or Abridged birth certificate
- 2 Learner's latest school report
- 3 Copy of Father/Guardian ID document
- 4 Copy of Mother/Guardian ID document
- 5 Legal guardianship documents or supporting documents must be provided when the parent is not the natural parent of the child.
- 6 Where parents are divorced we need a copy of the Divorce Decree
- 7 Copy of Municipal or Eskom account - **(APPLY TO HOME OWNERS ONLY)**
- 8 Copy of Lease Agreement and Statement - **(APPLY ONLY TO PROPERTY LEASING)**  
(must be original - not older than 2 months). If rental from friend or relative - provide affidavit
- 9 Proof of Mother/Guardian work address (Letter from company or a business card)
- 10 Proof of Father/Guardian work address (Letter from company or a business card)
- 11 Copy of CK/CC documentation in a case of Self employment
- 12 Copy of Immunisation card
- 13 R150.00 non-refundable Administration Fee - **We do not have card machine - EFT only**  
**(Bank details : Bryanston Grade 0, Standard Bank, Fourways Crossing,**  
**Branch Code: 009953, Acc No: 023358270 for EFT payments)**

**Parents / Guardians who are not South African Citizens, must submit the following additional documents:**

- a) Certified copy of the work permit in respect of the parents / guardians.
  - b) Certified copy of the temporary or permanent resident permit from the South African Department of Home Affairs.
  - c) Certified copy of the refugee permit for both the applicant and the applicant's parents. If your permit is due to expire before the child's studies are finished - then provide suitable proof for an extension.
  - d) In all other cases - a certified copy of the temporary residence document for the applicant and the applicant's parent. A study permit is not required at the time of application, however, upon admission for enrolment, the applicant must have the permit showing Foundation phase and Grade 0 approved.
- \* ALL OTHER SUPPORTING DOCUMENTS LISTED 1-13 ABOVE ARE ALSO REQUIRED.

**Applications WILL NOT be processed unless accompanied by ALL documentation.**

- Sections:
- A** Learner's Particulars
  - B** Learner's Known Medical Conditions
  - C** Parent / Guardian's Particulars
  - D** Alternative Emergency Contact Information
  - E** Indemnity Form
  - F** Collection Information
  - G** **School Rules - Keep information but return signed page**

**SECTION A: LEARNER'S PARTICULARS**

Surname				Initial			
First Name/s	Gender			Male	Female		
Current School				Tel No:			
Home Language	Date of Birth						
ID (SA)				Residents Permit No			
Immigrant Country of Origin				Immigrant date of entry into SA			
Home Address (where learner lives)				Learner lives with: ie. Both parents, mother / father / guardian (please specify)			
Relationship to Registering Person	Child	Ward	Other				
<b>Older Siblings</b>							
First name and Surname					Grade		
First name and Surname					Grade		
First name and Surname					Grade		
<b>Younger Siblings</b>							
First name					D.O.B.		
First name					D.O.B.		

**SECTION B: LEARNER'S KNOWN HEALTH AND MEDICAL CONDITIONS**

DOES THE LEARNER SUFFER FROM ANY OF THE FOLLOWING / IS ALLERGIC TO? (tick)							
<input type="checkbox"/>	Bee Sting	<input type="checkbox"/>	ADD/ADDHD	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>	
<input type="checkbox"/>	Asthma	<input type="checkbox"/>	Has Glasses	<input type="checkbox"/>	Heart Murmur	<input type="checkbox"/>	
<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Hearing Problem	Food Allergies			
<input type="checkbox"/>	Blackouts	<input type="checkbox"/>	Additional:				
PROHIBITED FOODS DUE TO RELIGION							
CHRONIC MEDICATION:				Please list the medication your child takes regularly, the time and the dosage.			
I, Parent / Guardian of _____ hereby give permission for the Principal of Bryanston Grade 0 (or the class educator) to take my child / children to hospital in the case of an emergency (should I be uncontactable).							
Signed: _____				Name: _____			

**SECTION C: PARENT'S / GUARDIANS PARTICULARS**

**PERSONAL INFORMATION**

FATHER / GUARDIAN				MOTHER / GUARDIAN						
<i>Surname</i>				<i>Surname</i>						
<i>First Name</i>				<i>First Name</i>						
<i>Title</i>				<i>Title</i>						
<i>Cell No</i>				<i>Cell No</i>						
<i>Email address</i>				<i>Email address</i>						
<i>Date of Birth</i>				<i>Date of Birth</i>						
<i>Home Language</i>				<i>Home Language</i>						
<i>Marital Status</i>	<i>Married</i>	<i>Div</i>	<i>Sep</i>	<i>Single</i>	<i>Marital Status</i>	<i>Married</i>	<i>Div</i>	<i>Sep</i>	<i>Wid</i>	<i>Single</i>
<i>ID Number</i>				<i>ID Number</i>						

**IMMIGRATION INFORMATION**

<i>Immigrant's Permit Number</i>		<i>Immigrant's Permit Number</i>	
<i>Immigrant's Country of Origin</i>		<i>Immigrant's Country of Origin</i>	
<i>Immigrant's Date of Entry into SA</i>		<i>Immigrant's Date of Entry into SA</i>	

**RESIDENTIAL INFORMATION**

<i>Home Street Address</i>		<i>Home Street Address</i>	
<i>Home Tel</i>		<i>Home Tel</i>	

**EMPLOYMENT INFORMATION**

<i>Employer</i>		<i>Employer</i>	
<i>Work Tel</i>		<i>Work Tel</i>	
<i>Work Fax</i>		<i>Work Fax</i>	
<i>E-mail</i>		<i>E-mail</i>	
<i>Business Address</i>		<i>Business Address</i>	
<i>Nature of Business</i>		<i>Nature of Business</i>	
<i>Position</i>		<i>Position</i>	
<i>Occupation</i>		<i>Occupation</i>	

**SECTION D: ALTERNATIVE EMERGENCY CONTACT DETAILS**

<b><u>NOT</u> PARENT / GUARDIAN INFORMATION</b>				
Title	Name & Surname			
Initials			Relationship to child / children	
Area code followed by the number				
Cell Number		Work Number		
<b>MEDICAL AID DETAILS</b>				
Medical Aid		Number		
Scheme Name		Main Member		
Membership Start Date		Membership Expiry Date		
Telephone Number				
Preferred Hospital (in case of emergency)		Please select one	Private	State
<b>FAMILY DOCTOR DETAILS</b>				
Name		Tel Number		

**SECTION E: INDEMNITY FORM FOR OUTINGS, EXTRA MURALS, AFTERCARE, ETC**

I, \_\_\_\_\_ (full names of parents / legal guardians) record that I have the following child / children at the Bryanston Grade 0 School which is run by the Directors, Officers and Staff of Bryanston Grade 0 School (Association Incorporated under Section 21), Registration Number: 96/09156/08. Name/s of child / children \_\_\_\_\_ I appreciate that whereas reasonable care is taken to protect my child / children from harm or injury, such harm or injury may befall said child whilst in the care and control of the staff of Bryanston Grade 0 School.

I hereby, on behalf of myself and on behalf of said child, waive any claim for damages arising from harm or injury to said child caused by any action or failure to act by the Bryanston Grade 0 School or it's staff or the driver of the vehicle transporting the children on a school outing, ***other than wilful or grossly negligent actions or failures to act***, and undertake not to institute any claims in this regard.

The Bryanston Grade 0 School and it's agents does not take responsibility for any child left on Bryanston School Property out of official school hours of 06h50-13h30.

I hereby indemnify the Directors, Officers and Staff of Bryanston Grade 0 School against any action or claim, which may arise from any such injury or harm to said child.

I hereby authorise the school, staff and other agents to procure such medical treatment/surgery as may in its/ their absolute discretion be deemed necessary. I undertake to indemnify the school, Governing Body, staff and other agents from all medical and hospital costs accasinmed thereby. I, by my signature hereto, acknowledge that I am "parent/guardian of, or person responsible for: \_\_\_\_\_ (full names and surname of learner) and that I have read and fully undrstand the terms of this indemnity.

Signed at \_\_\_\_\_ day of \_\_\_\_\_ 2021/22\_\_\_\_\_

**Mother Name & Signature**

**Father Name & Signature**

**BOTH PARENTS NEED TO SIGN**

## SECTION F: (COLLECTION INFORMATION)

***It is essential that we know your individual arrangements for fetching children at the end of the day.***

It is the responsibility of the Parents to collect children from the Grade 0 Premises at 13h00. Children who do Extra Murals will be collected at Bryanston Grade 0 no later than 13h40.

Educators will be on duty until 13h40 by which time all children must be collected at this time. NO child who is not enrolled in an Extra Mural may remain.

If a person other than the biological or step-parents, even another mother, friend or driver is collecting your child, this must be submitted in writing (with a copy of the person responsible for collection ID) to the Grade 0 Educators on the morning that it is going to happen. The person collecting the child must produce their ID. They are required to sign the child out. Should plans change during the morning, this should be emailed to [bryanstongrade0@triplex.co.za](mailto:bryanstongrade0@triplex.co.za). No Grade 0 child is permitted to be collected by an older sibling. Children may only be collected by a parent or pre-authorised adult.

The same procedure must be followed with aftercare children.

***The school will NOT, under any circumstances, release a child into the care of anyone who has not followed the procedure as set out above.***

As the Primary School classes are in progress between 07h30 to 13h40, parents are requested not to walk through the school during these times, so as not to disturb the pupils. You will find that parking is more freely available at 7:45am when the bulk of the Primary School children have been dropped off. If a transport Company is responsible for the collection of your child, they will have to follow the same rules and regulations.

***NO GRADE 0 LEARNER IS PERMITTED TO WAIT AT THE GATE OR OUTSIDE THE GRADE 0 AREA.***

## **SECTION H: SCHOOL RULES**

### **SCHOOL HOURS**

The school hours are 08h00 to 13h00.

Children may be dropped at school from 06h50 from which time there will be supervision. They must be in class by 08h00 when the academic day begins. No child will be allowed on Grade 0 property before 06h50 - this is the time that the teachers use to set up and prepare for the day.

Classes finish at 13h00. Children MUST be collected at this time unless a) they are booked into aftercare or b) they have an extra-mural.

NO RESPONSIBILITY is taken for children outside official school hours of 6h50 - 13h40. There is however an aftercare facility available at the Grade 0 School. This can be used on a monthly or occasional basis. Aftercare begins at 13h40. If your child is left on the Grade 0 premises after this time, you will be charged for aftercare accordingly.

### **INDEMNITY**

Whilst every care is taken to protect children from harm or injury, by law none of the Directors or Staff of Bryanston Grade 0 School shall be held liable for injuries which may be sustained by any child on the school property, or whilst transporting the child on a school outing. Nor shall they be responsible for any property lost during school hours. Parents are requested to mark all clothing clearly with the child's name.

### **PERSONAL DETAILS**

Should there be any change of postal or physical address, telephone contact numbers, email address, legal guardianship of the child, or any other changes to the information supplied on the Enrolment Form, the school must be notified immediately. This information is critical, as it may be needed in the case of an emergency.

### **HEALTH**

Children should have had all the required inoculations prior to attending school. Please notify the school office or class teacher should your child contract any contagious or infectious illness, or need to be kept at home due to any ailment.

### **SCHOOL TERMS 2022** (SCHOOL TERMS 2022 - as per proposed GDE Calender)

Gauteng Department of Education school terms will be followed. See below.

Term 1: 27 January - 31 March
Term 2: 13 April - 25 June
Term 3: 13 July - 23 September
Term 4: 5 October - 8 December

### GENERAL

Toys MAY NOT be brought to school. They WILL be confiscated until the end of term.  
Birthdays are to be arranged with the class teacher.

***This is a nut free school - No nuts allowed.***

### UNIFORM

**Summer** – Navy shorts with a Navy Grade 0 T-shirt and hat

**Winter** - Grade 0 Tracksuit, Grade 0 T-shirt and any shoes.

This uniform is COMPULSORY and should be well labelled.

### LUNCHES

The school does not provide food. Each child should bring a healthy, full mid-morning snack to school for snack time. If your child attends aftercare, they will be provided with a cooked lunch and a drink at 13h45.

### SCHOOL FEES

As the Grade 0 School operates without the support of the Gauteng Department of Education, and is an independent school and therefore dependent on fees for its successful operation, the following applies:

**Bank Details :**

**Standard Bank, Fourways Crossing, Branch Code – 009953,  
Account Number - 023 358 270**

No reduction in school fees is given if children cannot attend school due to extended holidays, illness etc or should the school be closed due to strike action or circumstances beyond our control.

Under extreme circumstances, due to COVID-19, the school will consider a payment plan to accommodate specific financial challenges on presentation of supporting documentation by the parents.

The school must be given **ONE FULL TERM'S NOTICE** (in writing) of the parent's intention to withdraw a child from the school. If this is not received by Bryanston Grade 0, parents will be liable for the term's fees.

**The Directors of the NPC shall be entitled to instruct its attorneys to attend to the collection of outstanding accounts. Parents or guardians will then be liable for payment of costs so incurred.**

**PS - KINDLY COMPLETE FORM ON NEXT PAGE**



**SECTION H: SCHOOL RULES (TO BE SIGNED AND RETURNED)**

**Name of Parents / Guardians** .....

**Child**.....

**Group** .....

I have read the School Rules and agree to the terms and conditions. I furthermore declare that the information supplied by me in these documents is, to the best of my knowledge and belief, true and correct.

**Date**.....

**Signature**.....

Father

.....

Mother

**Kindly note both parents need to sign**