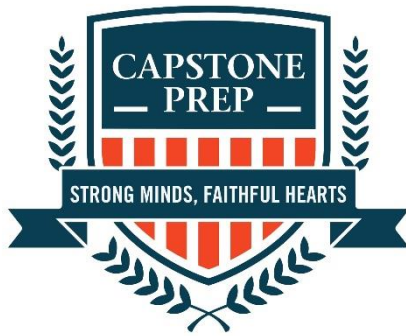




Capstone Prep Pty Ltd (ECD Site)

REG, NO, 2024/276309/07

Owner: **Amelia van der Merwe**

58/60 Le Maitre Street
Brackenhurst, 1450
Email: info@capstoneprep.co.za

Tel No: (011) 867 5756
Cell No: 0828245676
Website: capstoneprep.co.za

OUR AIM AT Capstone Prep IS TO PROMOTE THE HOLISTIC DEVELOPMENT OF THE MENTAL, EMOTIONAL, PHYSICAL AND INTELLECTUAL WELL-BEING OF ALL OUR LEARNERS, AS WELL AS THEIR SOCIAL AND MORAL EDUCATION.

We are by moral standing and constitution, a Christian school.

ENROLMENT FORM 2026

*To confirm your acceptance of the place your child has been offered, please complete, and return this form together with a **NON-REFUNDABLE**, cash, registration fee of: **R300.00**.*

This registration fee is charged annually and includes: an admin fee and stationery pack (classroom specific items).

(For office use only)

☐

Tatty Teddies/
3- 18 months

☐

Astronauts/ 3- 4yrs

☐

Forest Friends/
2-3yrs

☐

Owls/ 4 - 5yrs

☐

Grade R/ 5 - 6yrs

Date of Application: _____

Date Starting: _____

Nursery School Previously Attended: _____

SCHOOL FEES 2026

CLASS	MONTHLY	2026 ANNUAL FEES	2026 ANNUAL RATE @ 5% DISCOUNT IF PAID BY END JANUARY
BABY	3510.00	42 120.00	40 014.00
15MONTHS – GRADE 00	3510.00	42 120.00	40 014.00
GRADE R	3675.00	44 100	41 895.00
AFTER CARE	1995.00	23 940.00	22 743.00

NB: There is no half day rate.

***SIBLING DISCOUNT – R300**

PARENTS, PLEASE COMPLETE THE REST OF THIS DOCUMENT, INITIAL EACH PAGE AND SIGN WHERE NECESSARY. Please note: what you are filling in is personal information, we comply with the POPI ACT and the information given is only for use to enrol your child successfully in the school and it is information given with free will.

NAME AND SURNAME OF CHILD:

NICKNAME:

DATE OF BIRTH:

CHILD'S HOME LANGUAGE:

HOME ADDRESS OF CHILD:

ANY KNOWN ALLERGIES:

ANY DIETARY REQUIREMENTS:

INITIALS OF MOM____ & DAD _____

Capstone Prep

- NEW CREDIT ACT IS ENCLOSED
- PLEASE INITIAL EVERY PAGE
- PLEASE READ THIS DOCUMENT CAREFULLY

BANKING DETAILS:

Capstone Prep Pty Ltd

F.N.B Bracken City

Account number: 62163861034

Branch Code: 252242

Ref: Your child's name and surname

Please email proof of payment to: info@capstoneprep.co.za

PARENTS / GUARDIAN INFORMATION:

NAME OF MOTHER/ GUARDIAN: _____	NAME OF FATHER/ GUARDIAN: _____
ID NUMBER: _____	ID NUMBER: _____
RESIDENTIAL ADDRESS: _____ _____ _____	RESIDENTIAL ADDRESS: _____ _____ _____
OCCUPATION & WORKPLACE ADDRESS: _____ _____ _____	OCCUPATION & WORKPLACE ADDRESS: _____ _____ _____
CELL PHONE NUMBER: _____	CELL PHONE NUMBER: _____
OFFICE NUMBER: _____	OFFICE NUMBER: _____
EMAIL ADDRESS: _____	EMAIL ADDRESS: _____
ALTERNATE PERSON WHO CAN BE CALLED WHEN NEITHER PARENT/ GUARDIAN IS AVAILABLE:	
NAME: _____	CELL No: _____

INITIALS OF MOM___ & DAD _____

PERSON RESPONSIBLE FOR PAYMENT OF SCHOOL FEES:

NAME: _____

CELL NUMBER: _____

RELATIONSHIP TO CHILD: _____

SIGNATURE: _____

MEDICAL DETAILS:

NAME OF FAMILY DOCTOR: _____

MEDICAL AID SCHEME: _____

MEDICAL AID NUMBER: _____

NAME OF MAIN MEMBER: _____

HAS THE CHILD GOT ANY KNOWN MEDICAL PROBLEMS? _____

****Tots in Teams is our extra mural that every child takes part in, every Tuesday morning, their fees are R460.00 per term/quarter. This is a separate entity and their fee is payable directly to their account:***

Prinsloo, FNB, Alberton 250942, Acc No: 62077888380.

****Please note these are 2025 prices. Will advise as soon as possible***

On the first day of each new school year please send in: 2 reams of TYPEX paper.

Also, each term, each child must bring: 3 x boxes of tissues plus 3 x packs of wet wipes to school.

The baby class and potty training class: 6 x packs of wet wipes plus 3 x boxes of tissues each term

INITIALS OF MOM____ & DAD _____



Capstone Prep

(ECD SITE)

REG, NO, 2024/276309/07

58/60 Le Maitre Street

Brackenhurst, 1450

Tel No: (011) 867 5756

info@capstoneprep.co.za

This letter gives permission to Capstone Prep to administer the following to my child in the event of high fever or allergic reaction and the school is unable to get hold of me. I have ticked the box of the medicine my child is allowed and has no allergic reaction to:

Panado

☐

Calpol

☐

Allergex

☐

Child's Name and Surname:

Parent's Signature:

Date:

Please note: no children must attend school whilst on antibiotics, if your child is sick, please do not send them to school, this will avoid the spread of illness.

Class Whatsapp Group / Social Media Use of Photos; Permission Slip:

Do you agree/ not agree to let us take videos and class photos and share on our class whatsapp groups and can your child's face be shown? Please understand that individual photos are not always an option.

Also, to post videos or photos on our Capstone Prep's Instagram or Facebook Page, can your child's face be shown?

We have so many cute moments that we are unable to share and we really would like to make you all a part of the special times at Capstone Prep

Please tick appropriate box

My child **can** be shown on group photos or videos on the class Whatsapp groups

☐

My child **cannot** be shown on group photos or videos on the class Whatsapp groups

☐

My child **can** be on Capstone Prep Instagram / Facebook posts

☐

My child **cannot** be on Capstone Prep Instagram/ Facebook posts

☐

Signed by parent: _____

Capstone Prep

TERMS AND CONDITIONS OF THIS AGREEMENT:

1. OPERATING HOURS:

Summer Times (January – April. September – December)

Monday to Friday **06H30 – 18H00**

Winter Times (May – August)

Monday to Friday **06H30 – 17H30**

An immediate fine of **R400** will be issued if a child is collected after the closing time **PLUS** R100 for each additional 5 minutes thereafter.

2. **Fees are payable strictly in advance, on or before the 4th of each month.** Your child will be suspended until the account is paid. School fees are payable during the suspension period.
3. One month's written notice on the 1st day of the month is required for termination of enrolment. If this is not adhered to a full month's fee will be charged. Notice will **not** be accepted over the phone or for the period October to December. All overdue accounts will lead to suspension. If the account is not settled the account will be handed over for collection, your information will be given to the attorneys handling the collection. Legal costs will be for your account.
4. THE NURSERY SCHOOL IS CLOSED OVER THE FESTIVE SEASON AND PARENTS ARE LIABLE TO PAY FEES IN ADVANCE FOR THE MONTH OF DECEMBER.

I, parent/ guardian of _____ have read and understood point **3** and agree with this condition of termination.

Signature: Mother

Signature: Father

Signature: Guardian

Signed on this _____ day of _____ 20____

5. School fees must be paid for the month even if absent, sick or on holiday.
6. The school's control of infection and safety requirements are strict, and we need everyone to adhere to the following:
- Do not send learners to school with a fever of 37.5 or higher.
 - Do not send learners to school with any infectious diseases.
 - Do not send any learner to school who has had symptoms.
 - Do not send any medication to school. By Law we are not allowed to administer any medication unless the previous page; Medication Permission has been signed and we will only give your child medication in the event you are unavailable. **If your child is on antibiotics, they may not attend school.**
7. If, for any reason, your child was upset or experiencing any problems at home, please inform the teacher so that she can understand and assist your child.
8. All children's clothing must be clearly marked, children need to be encouraged to be independent at toilet time. Please make sure their clothing is easy to remove, tight jeans make it very difficult for children to play and go to the bathroom.

INITIALS OF MOM____ & DAD _____

9. Children must have a change of clothes sent in each day, a warm jersey, sunhat, sunscreen and an empty juice bottle. They can bring in their own cereal and an afternoon snack should they wish to. But we do supply breakfast, am snack, lunch and pm snack. Plus, juice and water all day.
10. Should you arrange for someone else to collect your child, the office needs to be informed, well before time and the person's name, car make and model also to be given.
11. Children are prohibited from bringing toys to school unless it is Holiday Programme, we will advise beforehand.
12. Please inform us **immediately** if any cell numbers, email addresses etc change, we need to be able to contact you.
13. We do promote our school on Instagram and Facebook, photos of learners are posted, should you not want your child to be photographed please let us know. We only post photos on these sites for the upliftment of the learners.

Amelia van de Merwe, as the owner of Capstone Prep Pty Ltd, reserves the right to give a parent notice of services rendered.

I/We the undersigned, have carefully read the Terms and Conditions of this Enrolment Form and accept the contents thereof by signing below.

I/We the undersigned give full consent that my/our child may be given medical treatment if necessary, when either parent cannot be reached.

Signature (MOTHER)

PRINT NAME & SURNAME

Signature (FATHER)

PRINT NAME & SURNAME

Signature (on behalf of
Capstone Prep Pty Ltd)

PRINT NAME & SURNAME

INITIALS OF MOM____ & DAD _____

NATIONAL CREDIT ACT

I/ We the undersigned hereby agree and permit that **CAPSTONE PREP Pty Ltd** is entitled to:

1. Make any reasonable enquiries to any party to verify and research any details provided by the applicant on this application form or any other details in relation thereto.
2. Access the files of any credit bureau or its agent or its clients to ascertain the Applicant's and its Directors and/or Members and/or Principal's total available credit profiles when assessing this application and at any time during the currency of the Applicant's account with the Supplier.
3. Disclose the existence and the conduct of the Applicant's account with the Supplier, whether still current or not, to any Credit Bureau or any other credit granter for publication.

INTEREST CLAUSE:

1. The Applicant hereby acknowledges that should any amount not be paid on the due date, the full amount owing by the Applicant to the creditor shall immediately become due and payable without any notice whatsoever notwithstanding that any amount may, as at that date, not yet be due. The Applicant shall pay interest on all overdue amounts at a compound rate of 10%.
2. The Applicant further agrees that in the event of its default in any respect whatsoever towards the creditor, the creditor shall be entitled to place the application on 'stop supply' without any notice notwithstanding that the Applicant may have placed an order for the supply of service prior to the stop supply date.

COST CLAUSE:

In the event of the creditor instructing its attorneys or collectors agents to collect any amounts, all legal fees and collection charges and tracing agents' fees as between attorney and client, shall be borne by the Applicant and all payments made shall firstly be allocated towards such fees and charges thereafter to interest and finally to capital.

MAGISTRATE'S JURISDICTION CLAUSE:

The Applicant and the surety/ies hereby consent to the authority of the magistrate court for all actions which may be instituted against one or all for the recovery of any amounts owing to the creditor.

The Applicant chooses the street address which is furnished on the Application form for Credit Facilities as domicillium citandi et executani for all purposes in respect of the Credit Facilities. Any charges of the said domicillium can only be effected by the Applicant notifying

CAPSTONE PREP Pty Ltd in writing of another complete address.

I/We hereby declare and acknowledge that I/We are duly authorised to sign any/all documents on behalf of my/our company. I/We hereby further declare that we have read and understand the Standard terms and Conditions of CAPSTONE PREP Pty Ltd.

Name and surname: _____

ID Number: _____

Signature: _____

INITIALS OF MOM____ & DAD _____

INDEMNITY FORM:

I, the undersigned,

PLEASE PRINT YOUR FULL NAME AND SURNAME.

The mother/father and natural legal guardian of:

PLEASE PRINT YOUR CHILD'S FULL NAME AND SURNAME,

Do hereby consent to the participation of my child/children in all games, extra-mural activities, and games at the centre (school).

Whilst it is recognised that the centre will take every precaution to ensure the safety of my child, I,

1. Waive all claims against **CAPSTONE PREP Pty Ltd**, its proprietor/s, servants and/or agents which may arise and/or out of their custody and care of the previously mentioned child.
2. Indemnify **CAPSTONE PREP Pty Ltd** and/or its proprietor/s and/or agents against all claims which may be brought against them, whether by the previously mentioned child or any other person, arising out of their custody and care of the said child. Also, recognise that in an emergency, **CAPSTONE PREP Pty Ltd**, will in the best interests of the child, transport the child to hospital if you are unavailable.
3. Send my child to **CAPSTONE PREP Pty Ltd** voluntarily.

SIGNATURE: _____ **PRINCIPAL:** _____

SIGNED AT: _____ **DATE:** _____

INITIALS OF MOM____ & DAD _____

CAPSTONE PREP / BEHAVIOUR POLICY

Certain behaviours are not tolerated at our school, we are here to build upon the manners and basic social skills that you as parents have begun at home.

TIME OUT

This goes according to a child's age, e.g. – 4 years old = 4 minutes on the time out chair.

STEALING OR SWEARING

Parents will be contacted and asked to discipline the child, verbal counselling will be given to both parents and child. Should the problem continue, the child will be asked to leave the school.

DISREGARD FOR SCHOOL PROPERTY

Should a child purposefully break or damage the school's/ fellow pupil or teacher's property, the parent will be asked to pay damages.

ABUSIVE OR VIOLENT BEHAVIOUR TOWARDS A MEMBER OF STAFF

The parent will be contacted immediately and asked to come and take the child home for the suspension period deemed appropriate by the school. If the problem persists the child will be asked to leave the school. This type of behaviour will not be tolerated.

BULLYING

This type of behaviour will not be tolerated at all.

BITING

This is something that occurs in the smaller age groups and must be handled at home by the parents, it is very distressing for the parents of the bitten child and cannot be allowed to continue.

CONTINUOUS DISREGARD/ DISRESPECT SHOWN TO TEACHERS OR DISRUPTION OF LESSONS

We occasionally experience learners who lack good manners, those who won't listen to reasonable instruction and who have little or no respect for the teacher. This makes our jobs extremely frustrating and difficult. It also impacts on the class and the other learner's ability to learn. Should such behaviour continue after a parent has been informed, we will ask you to remove your child from the school.

INITIALS OF MOM___ & DAD _____

*** NB: Please note that with the return of this form we need:**

- 1) Child's immunisation card**
- 2) Copy of medical aid card**
- 3) Copy of child's birth certificate**
- 4) Copies of both parent's ID documents**
- 5) Colour ID photo of child.**
- 6) *All personal information given to Capstone Prep is kept safe, we do not share personal information. Only the Dept of Education or Dept of Social Development have access to any information pertaining to your child and their education. When we receive your information, upon enrolment, it is stored on our PC which has a password, also the hardcopies are filed and kept under lock and key. Once your child leaves the school, all information will be kept for 5 years as per the Act and thereafter destroyed. We have CCTV cameras and should an incident occur that requires parents to watch the footage this is arranged but no hardcopies of footage can be given as a result of the other children in the class and their privacy.**
- 7) Whatsapp class groups are for sharing information but any photos of a child will be sent to each parent individually.**
- 8) Due to the POPI Act we are unable to share any parent's information with another parent, such as, cell phone numbers.**

“Education is the most powerful gift we can give our children – thank you for choosing us to be part of your child's journey”

