

Enquiry Form

This is not an application form. Your details will be placed on our data base. You will be invited for an interview and an assessment of your child.

Please circle the grade you are interested in:									
GRADE:	R 1	2	3	4	5	6	7	YEAR	
* Person Responsible for Payment of Fees:									
MOTHER (GUARDIAN/CUSTODIAN)							FATI	THER (GUARDIAN/CUSTODIAN)	
Full Name:							Full	Name:	
Cell:							Cell	ll:	
Email Address:						Emo	ail Address:		
Home Number:						Hon	me Number:		
Work Number:						Wor	Work Number:		
Occupation/Name of Company:						Occ	Occupation/Name of Company:		
ID number / Passport Number if not SA Citizen						n ID n	ID number / Passport Number if not SA Citizen		
Date of birth: (dd/mm/yyyy)							Date	te of birth: (dd/mm/yyyy)	
Physical Address:							Phys	Physical Address:	
				С	ode:			Code:	
Postal Address:						Post	stal Address:		
								Carla	
				C	ode:			Code:	
Name of St	uder	nt:							
Date of birth	: (dd/n	nm/yyyy	·)						
Gender		Boy / Girl							
Current Age:						Cun	rrent Grade:		
Current Scho	ol:								
* Should you v responsible fo								nool, a credit check may be performed on the person	