

- Certified copies of both parents Identification documents
- N\$ 50 non-refundable Application fee
- N\$ 900 non-refundable Registration fee (yearly)
- Proof of residence (municipality bill)

DETAILS OF PUPIL

SURNAME:		
FIRST NAMES:		
DATE OF BIRTH:	_HOME LANGUAGE:	
OTHER LANGUAGES:	GRADE APPLIED FOR:	
PREVIOUS SCHOOL (IF ANY):		
NAME/S OF SIBLING/S AT OUR SCHOOL :		
:		
:		
:		

MEDICAL INFORMATION

DOCTOR'S NAME:	DOCTOR'S TELEPHONE NO:
ANY ALLERGIES OR DISABILITY OF YOUR CHILD:	
IS THERE ANY OTHER INFORMATION ABOUT YOUR CH	ILD THAT THE SCHOOL/STAFF SHOULD BE AWARE OF?

Proverbs 9:10 - The fear of the Lord is the beginning of wisdom



PARENT/(S) OR GUARDIANS DETAILS

FATHER'S FULL NAME:			
PASSPORT NO:	_OR I.D.:		_
MOTHER'S FULL NAME:			
PASSPORT NO:	OR I.D.:		_
GUARDIAN'S FULL NAME:			
PASSPORT NO:	OR I.D.:		_
RESIDENTIAL ADDRESS:			
CONTACT NUMBER (AT HOME):		(AT WORK):	
CELL NO. (FATHER):		_ CELL NO. (MOTHER):	
ACCOUNT HOLDER NAME:			
POSTAL ADDRESS:			
EMAIL ADDRESS:			

EMPLOYMENT DETAILS

FATHER:	
MOTHER:	
GUARDIAN:	
DENOMINATION:	

You will also have to sign a Contractual Agreement and an Indemnity form.

SIGNATURE: _

(PARENT/S OR GUARDIAN/S)

DATE:



CONTRACTUAL AGREEMENT ON ACCEPTANCE OF A PLACE AT EDEN SEVENTH – DAY ADVENTIST ACADEMY

I/We			hereby register my child
		in	to begin
on the	of	20	

I/We have read and accept the conditions set out below:

1. Full participation in the school's curriculum is essential.

2. I/We will abide to the School policies and rules and will ensure that my/our child too will abide by the rules.

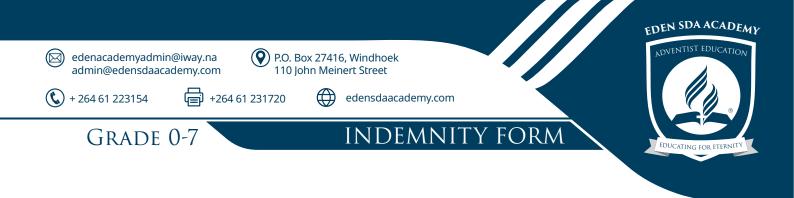
- 3. I/We will pay school fees in advance, starting at the month for fees that are due.
- 4. Once my/our child is registered with the school for this service I ought to pay even if my/our child doesn't attend some days of the month.
- 5. Once you pay registration fees, your child/ren secures a place in our school.
- 6. I/We will buy all the required stationery listed items and bring them when needed.

I_____accept the responsibility for all the financial obligations and understand that failure to pay by the end of every month will automatically result in being handed over to debt collectors/lawyers and also accept that no funds will be given to me on school fees paid upfront if all I fail to give one month's notice should I decide to take my child to another school. I will be liable for all legal costs.

SIGNATURE:		(Parent/C	Guardian
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DATE: _____

__PLACE: _____



I/WE	 	·····	
Residential Address_	 		

Parents/Guardians of_

Gave consent for my/our child to Partake in school outings.

I promise not to hold the school liable for any losses of property or injury of my/our child/ren during outings. The staff will, however, have to take necessary precautions for safety and welfare of my/our child/children.

NB: The parents and a witness must sign this form otherwise your child/ren will be excluded from all Eden SDA Academy outings.

Signature (Parents/Guardian)

Father:	Mother:
Signature of witness:	-
Date:	Place:



The school is grateful that you have decided to register your child at our school, and may our Christcentered learning grow and develop the character of your child. The following conditions are applicable to every learner registered at our school and parents who register a learner at this school bind themselves to the conditions stipulated below:

- 1. No learner may be registered at this school unless a copy of this document is signed and attached to the registration form and submitted to the school. There is no exception to this rule.
- 2. Fees are payable a month in advance.
- 3. Monthly fees are due before the 7th of the following month. Should parents foresee delays in meeting this obligation it is their obligation to inform the school in advance and the school will use its discretion to accept their request.
- 4. The school will not be held responsible for fees paid into the wrong account or fees banked with wrong or unclear references. The child`s full name & surname and grade should always be used as a reference in all payments to the school.
- 5. Fees in arrears of 60 days will result in some or all of the following actions:
- Suspending the learner until arrears are paid/barring them from writing exams.
- Engaging debt collectors to recover outstanding fees.

6. No learner may attend school on the following term if they have arrears from the previous term.

- 7. The school will periodically send you statements of fees. You may contact the school anytime during the year to request a statement of fees for your child should you so wish.
- 8. It is the obligation of the parent/s to seek clarity from the school in understanding the contents of this document before they enroll their child at this school.

Ι	(Full name/s and surname)
I.D. NUMBER:	DECLARE THAT I HAVE UNDERSTOOD MY FINANCIAL OBLIGATION TO THE
SCHOOL AND I AGREE TO ABIDE BY ALL THE CON	IDITIONS STATED IN THIS DOCUMENT. I ALSO AGREE THAT THE SCHOOL CAN
SUSPEND MY CHILD	IN GRADE OR TAKE LEGAL ACTION
AGAINST ME FOR ANY OUTSTANDING ARREARS	AT ANY TIME. I ALSO UNDERSTAND THAT THE SCHOOL MAY BAR MY CHILD
FROM WRITING EXAMS, TESTS, AND OTHER ASSES	SSMENT TASKS IF MY CHILD`S FEES ARE IN ARREARS.
SIGNATURE	DATE