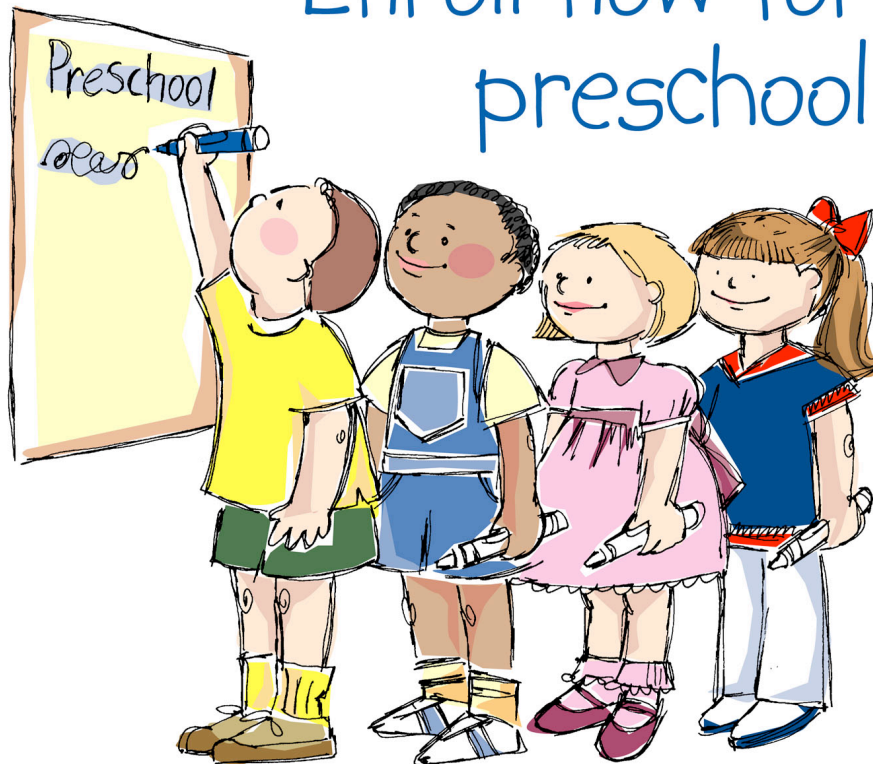


Little Graduates

Enroll now for
preschool



ADMISSION FORMS

A warm word of Welcome to you and your child at Little Graduates Learning Academy. As Staff of Little Graduates our first priority is to provide a quality service and loving environment to you and your child.

INFORMATION FOR ADMISSION

DATE OF INTENDED ADMISSION:	
SURNAME:	
FIRST NAMES OF CHILD:	
NAME BY WHICH CHILD IS KNOWN:	
DATE OF BIRTH:	AGE NEXT BIRTHDAY:
PLACE OF CHILD IN FAMILY:	
GIRL / BOY	
NAME OF FATHER:	
I.D NUMBER OF FATHER	
NAME OF MOTHER:	
I.D NUMBER OF MOTHER	
HOME ADDRESS:	
POSTAL ADDRESS:	
HOME TEL NR:	
E-MAIL ADDRESS:	
FAX NUMBER:	
HOME LANGUAGE:	
OCCUPATION OF FATHER:	
WORK TEL:	CELL NR:
OCCUPATION OF MOTHER:	
WORK TEL:	CELL NR:
SCHOOL / PLAYGROUP LAST ATTENDED:	
RELIGIOUS AFFILIATION:	

INDEMNITY FORM

I, hereby indemnify Little Graduates Learning Academy, the facilitators, all employees of the school and also any agents, guests or any other persons associated with the school of said facilitators/teachers, in respect of any injury sustained or damage suffered by my son/daughter consequent upon any negligent act of any outing by or on behalf of the school or any of the said persons.

This indemnity shall in addition be deemed operative as against any third party person suffering damage consequent upon such injury, damage or death.

Signed: _____ at _____ on

this day _____ of _____ 20____