

RegistrationForm | 2026

Registration is subject to signing of application form (attach copy of ID), emergency release, field trip permission and the indemnity form.

CHILD'S INFORMATION		Please attach child's photo here
Full Name(s) :		
Surname:		
Preferred Name :		
ID Number :		
Date of Birth :	Home Phone :	
Address Line 1:	Address Line 2 :	
Suburb:	City:	
Province :	Postal Code :	
DADENTIC INFORMATION (MOTHER	2)	
PARENT'S INFORMATION (MOTHER	₹)	
Full Name(s) :		
Surname :		
Employer's Name:		
Occupation :		
Work Address :		
Work Phone :	Ext:	
Home Phone :	Cellular Phone :	
Address Line 1:	Address Line 2 :	
Suburb:	City:	
Province:	Postal Code :	

PARENT'S INFORMATION (FATHER)

Full Name(s) :				
Surname :				
Employer's Name:				
Occupation :				
Work Address :				
Work Phone :		Ext:		
Home Phone :		Cellular Phone :		
Address Line 1 :		Address Line 2 :		
Suburb :		City:		
Province :		Postal Code :		
PARENT'S RELATIONSHIP (PLEASE TICK)				
Married :	Living Together:	Divorced :		
Separated :	Widowed:	Single:		

MEDICAL HISTORY

Please be sure to inform us if your child has any allergies or is taking any specific medication. If you have any medication that needs to be given to your child please mark the bottle with child's name. Hand it to the caregiver in charge with necessary instructions.

EMERGENCY CONTACTS

Any special health conditions:

Primary Emergency Contact (other than parents or guardian)				
Name and Surname :				
Relationship to child :				
Home Phone :	Work Phone :			
Address Line 1:	Address Line 2:			
Suburb:	City:			
Province:	Postal Code :			
Secondary Emergency Contact (other than parents or guardian	n)			
Name and Surname :				
Relationship to child :				
Home Phone :	Work Phone :			
Address Line 1:	Address Line 2:			
Suburb:	City:			
Province:	Postal Code :			
EMERGENCY INFORMATION				
Child's Doctor:	Phone:			
Preferred Hospital :	Phone:			
Regular Medications :	Medicine allergic to:			
Food allergies :	Any other allergies :			

INDEMNITY

In the unlikely and unfortunate event of natural disasters, fires, floods, lighting etc. occurring not be held responsible for any loss suffered as a result.

- 1. Furthermore,
 - shall not be held responsible (Financial, legally or otherwise) for any loss of valuable and personal possessions or personal injury resulting from the participation of the child attending any educational exercise, outing, or daily activities of the Crèche.
- 2. Solely, by permitting attendance of the child to the Crèche, I acknowledge and agree to abide to the abovementioned conditions.

ACCOUNT PAYMENT

I, (Parent/Guardian) agree that I will pay the Crèche account without fail; on or before the due date.

Arrears of 30 days or more will be handed over for collection with all the associated costs (i.e. Attorneys, court etc.)

I (the signatory - Parent/Guardian) understand this is a legally binding document. I have read it and fully understand its contents. All the contents were fully explained to me. I have no objection in signing this contract.

Name & Surname (Mother) :		
ID Number :		
Signature :	Date:	
Name & Surname (Father) :		
ID Number :		
Signature :	Date:	

Persons signing contract is responsible for payment.

(PLEASE ATTACH COPY OF I.D.)

EMERGENCY RELEASE

Consent to Emergency First Aid & Transportation:

, 5 ,	my child, Name			
May be given emergency trea my child to be transported by Immanuel Cay care Centre an	car/ambulance, to any	emergency Centre fo		_
Name & Surname (Mother) :				
ID Number :				
Signature :			Date:	
Name & Surname (Father) :				
ID Number :				
Signature :			Date:	
FIELD TRIP PERMIS	SION			
FIELD TRIP PERMIS				
FIELD TRIP PERMIS I hereby request that my child be permitted to participate in outside of the day care for his	, Name: fields trips, to the park,	=		_
I hereby request that my child be permitted to participate in	, Name: fields trips, to the park,	=	d agree to hol	_
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I hereby request that my child be permitted to participate in	, Name: fields trips, to the park,	=	d agree to hol	d
I hereby request that my child be permitted to participate in outside of the day care for his Name & Surname (Mother) :	, Name: fields trips, to the park,	=	d agree to hol	d
I hereby request that my child be permitted to participate in outside of the day care for his Name & Surname (Mother) : ID Number :	, Name: fields trips, to the park,	=	d agree to hol	d
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GRADUATION

Graduation Fee package R 250.00 including meals.

- We provide children with 3 meals per day, breakfast, lunch and Snacks
- Our Uniform:
- A 3 (three) months notice is required when you remove your child from the centre.
- We also cater for children with special need, those HIV positive and Aids infected or affected.
- NB NO REFUND OF ANY PAYMENT OR TOILETRIES WIL BE GIVEN AND / OR ANY DISCOUNT

PHOTOGRAPHY & MEDIA CONSENT

I, the undersigned parent/guardian of

hereby grant permission to Immanuel Day Care Centre to photograph, record, and use images and/or videos of my child for the purpose of displaying on the school's website, social media pages, newsletters, and any other promotional or educational materials related to the school.

I understand that these images/videos may be used publicly for the purpose of showcasing activities, achievements, and events at Immanuel Day Care Centre. I acknowledge that no personal information (such as full names) will be disclosed alongside the images without additional consent.

I acknowledge that this consent is voluntary and that I may withdraw it at any time by providing written notice to Immanuel Day Care Centre.

By signing below, I confirm that I have read and understood this consent and voluntarily agree to allow the school to use my child's images as described above.

Name & Surname (Mother) :		
ID Number :		
Signature :	Date:	
Name & Surname (Father) :		
ID Number :		
Signature :	Date:	

RULES AND REGULATIONS

- 1. A registration fee of R250.00 is payable before admission of the child. A school fee is paid monthly. 2. No refund will be payable during the period which the child does not attend the crèche. 3. Your child must be collected from crèche not later than 17h00, unless special arrangements have being made. 4. Should parents wish to remove the child from day care a three months written notice is required. 5. Parents must undertake to attend meetings as requested by the crèche, if unable to attend send a representative. 6. A photocopy of the immunization (clinic card) card and birth certificate must be submitted. 7. Children must be presentable and clean when brought to the day care centre. 8. Parents must report any problem the child may have to the teacher, e.g. refusing feed, unwell at night or over the weekend, doctors order etc.
- 9. Registration is subject to signing of application form (attach copy of ID) emergency release, field trip permission and the indemnity form.
- 10 .No sick child should be brought to the day care centre.
- 11. All trips are compulsory even if you are not attending, due to fundraising.
- 12. Parents must undertake to buy a cake, sweets, juice, chips etc. for the class on their children's birthdays.
- 13. No child/children are to be dropped at the gate.