



HUIS JAN STANDER

APPLICATION FOR ADMISSION



IMPORTANT

1. This form must be completed by the parent(s) or legal guardian(s).
2. All the sections must be completed.
3. A separate form must be completed for each child who is applying for admission.
4. **Boarding fees are payable in advance and accommodation can be refused should the fees be in arrears.**
5. A copy of your medical aid card must accompany the application form.
6. An admission fee of R100 per learner is payable at first admission.



DATE ON WHICH ACCOMMODATION IS REQUIRED: _____
TERMLY OR MONTHLY BOARDER: _____

SECTION D – MEDICAL DETAILS

MEDICAL AID NAME																		
MEDICAL AID NUMBER																		
PLAN																		
MAIN MEMBER																		
DOCTOR									TEL									
DENTIST									TEL									
CONTACT PERSON & NO (NOT PARENTS/GUARDIAN)																		
2. Does he/she suffer from any of the following?																		
Epilepsy	YES	NO			Heart disease		YES	NO										
Asthma	YES	NO			Diabetes		YES	NO										
3. Is he/she on chronic medication?																	YES	NO
Please elaborate if yes:																		
4. Does he/she suffer from allergies?																	YES	NO
Please elaborate if yes:																		

SECTION D - STATEMENTS BY PARENT/GUARDIAN

I, _____ (full name)

1. Certify herewith that the information in this forms is true, to the best of my knowledge;
2. Undertake to inform the hostel/school should my address or telephone number or circumstances change that effect the information herein;
3. Undertake to assist the hostel in upholding discipline;
4. **ACCEPT FULL RESPONSIBILTY FOR THE PAYMENT OF THE PRESCRIBED FEES.**

SIGNATURE _____

DATE _____