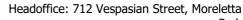
Reg 2012/042729/07



Tel: 086 126 8883

E-Mail <u>info@advancedcollege.co.za</u>
Web: <u>www.advancedcollege.co.za</u>

& Home Schooling In Pretoria East, Centurion, Kempton Park Midrand, Roodepoort, Thabazimbi



ADVANCED COLLEGE (PTY) LTD

<u>Advanced College SA – Stormvoël</u> <u>Aftercare - 2019</u>

DETAILS OF C	CHILD / CHIL	.DREN:		
First Child:	Grade:	Name and Surname:		
Second Child:	Grade:	Name and Surname:		
Third Child:	Grade:	Name and Surname:		
Full Home add	ress:			
Telephone Nui Home:		Parents' Names:		
Office No (Mother):		(Cell)		
Office No (Father):		(Cell)		
Addres	: ss:	CONTACTS: Office:		
Name:	:			
Addres	ss:	Office:		
Addres	ss:			
Tel. No	o: Home	Office:	Cell:	
Signature of all Pa	rties:			

COLLECTION	rage 2 or .
COLLECTION: Who may collect you	r child / children?
1	
2	
Family Doctor's Name:	Tel. No.:
Please list any medical	information about which the Aftercare Staff should be aware:
Medical Societ	y: Medical Aid Number:
ACCOUNTS:	
Fees: R500 per month	per child (Please email proof of payment to info@advancedcollege.co.za)
Bank: Account name: Account number: Branch code: Branch: Use Reference:	
INDEMNITY:	
SA, the Board of Go aforementioned, again	natural, adoptive or foster parents) hereby indemnify and agree to hold harmless Advanced College vernors, the Headmistress and Staff, or the authorised agents or representatives of the st any and all claims, howsoever arising, including negligence, arising out of any injury, death, loss se, including legal costs, suffered by the pupil or a third party as a result of or during the pupil's re.
I have read and unders	tand the contents of this document and agree to abide by all the terms and conditions herein.
SIGNATURE PARENT/LEGAL GUARD	DATE
Signature of all Parties:	