



St Dominic's College, Welkom

AFTERCARE FORM

PLEASE COMPLETE AND RETURN TO MRS RIKA MARSHALL
rmarshall@dominic.co.za

Select area of Entry
 (Tick appropriate box)

Pre-Primary School	Primary School Grade 1 and 2	Primary School Grade 3	Primary School Grade 4 to 7
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CHILD'S DETAILS

Child's surname			
Child's full names			
Child known as		Grade:	
Date of birth		Gender	
Identity number			
Home language		Age	
Child's address (if differs from parents)			

MEDICAL INFORMATION SHEET

Name of Medical scheme		Name of plan	
Membership No		Member's Name	
Main member's full names			
Family Doctor's name		Dr Tel. No.	
Child's Allergies/ medical condition/s (e.g. asthma, diabetes, epilepsy, etc.)			
Is there any additional information you feel we should know about?			
Alternative contact if neither father nor mother are available	Name		
	Tel No.		Relationship to child

PEOPLE AUTHORISED TO FETCH YOUR CHILD

Surname 1:		Name	
Cell Number		I.D. Number	
Surname 2:		Name	
Cell Number		I.D. Number	

FATHER/STEPFATHER/GUARDIAN

Surname		Title		
Full first names				
Marital status	Married to child's biological mother	Re-married	Divorced	Single, never married
Home address				
		Code		
ID number		Nationality		
Employer name (Company)		Occupation		
Contact details	Cell	Work		
		Home		
	Email			

MOTHER/STEMOTHER/GUARDIAN

Surname		Title		
Full first names				
Marital status	Married to child's biological mother	Re-married	Divorced	Single, never married
Home address				
		Code		
ID number		Nationality		
Employer name (Company)		Occupation		
Contact details	Cell	Work		
		Home		
	Email			

Method of Payment (Please tick preference)

Debit Order Direct Deposit Cash

Banking Details: St Dominic's College
Standard Bank
Current Account: 040 146 995
Branch Number: 051-001

I, _____ parent/guardian of _____ wish my child to attend the St. Dominic's Aftercare at my own risk and agree to abide by the rules and regulations governing it. I hereby agree to pay the fees monthly, in advance, and to give one month's written notice if I intend to remove my child. I agree to pay all medical bills which may arise in case of an emergency involving my child.

Signed at _____ on this the _____ day of _____ 20__.

DATE: _____ SIGNATURE OF PARENT: _____

AFTERCARE INFORMATION

Aftercare Pre-Primary School

Aftercare is available at the Pre-Primary School daily, for a nominal fee, from Mondays to Thursdays between 13h30 and 17h00, and on Fridays between 13h30 and 16h30, under the care of a qualified teacher. This facility is not available during school holidays.

The daily programme has been structured along prescribed Pre-Primary school lines to enrich each child's experience and guide him/her towards school readiness. The groups follow a thematic approach with art, stories, music, drama and movement being incorporated into each theme. Our teachers are all creative, enthusiastic and caring people who have the children's best interests at heart. We also have wonderful assistants to help in the classrooms.

Aftercare Primary School

For a nominal fee aftercare is provided for Grades 1 to 7 from Mondays to Thursdays between 14h00 and 17h00, and on Fridays between 13h45 and 16h30, under the care of a qualified teacher. Homework is supervised in this secure and loving environment.

Pre-Primary School	Primary School Grade 1 and 2	Primary School Grade 3	Primary School Grade 4 to 7
Helen Harvey 083 628 1698	Erna van Rooyen 082 821 6933		Sonja Clunie 072 389 9136

Please see our school's Fee Structure list for prices.