



2027

GR R APPLICATION

EMIS nr: 300057202

NPC Reg: 2018/199707/08

Tel: (053) 492-3008

EMAIL: ktckuruman@gmail.com

Website: www.ktcschool.com

**ADDRESS: SUMMERDOWN COMPLEX, BUILDING NR 9,
DANIELSKUIL RD, KURUMAN 8460
Private Bag X1534 SN24, Kuruman 8460**

GRADE R

Payment options	Debit Order		Cash		Remarks
	<i>Yearly</i>	<i>Monthly</i>	<i>Yearly</i>	<i>Monthly</i>	
Half Day (07:30- 13:15):	R 27,000.00	R 2,250.00	R 29,520.00	R 2,460.00	Supply own lunch
After care (13:15-14:30)		R150.00		R200.00	Supply own lunch
Supervision (13:15 -17:00)		R300.00		R350.00	Supply own lunch
Registration Fees:	R2,000.00 per child once off NON-REFUNDABLE				

TEXTBOOK FEES: COMPULSORY!

<u>GRADE</u>	<u>AMOUNT</u>
GRADE R	R 780.00

SPECIAL NOTE: Textbooks fees are once off payments and will not be added to any debit orders. Please make sure that when making an EFT payment, that you use the name and surname of the learner so that we know who to allocate the transaction to and to prevent any confusion.

PLEASE TAKE NOTE THE FOLLOWING DISCOUNTS APPLY:

- 10% IF 12 MONTHS PAID IN ADVANCE ON CASH PRICE
- 5% IF 6 MONTHS PAID IN ADVANCE ON CASH PRICE
- 2.5% IF 3 MONTHS PAID IN ADVANCE
- 5% ADDITIONAL DISCOUNT IF 3 OR MORE CHILDREN OF THE SAME PARENTS ARE ENROLLED
- Late collection fee of R 50.00 per half hour to be added to account for late collections.
- PLEASE CHECK NEXT PAGE FOR TEXTBOOK FEES. (REQUIRED FOR ALL GRADES)

If there are enquiries regarding finances, please email us at finances@ktcschool.com.

Banking Details
 Kuruman Tuition Centre
 FNB
 Account Number: 62777641484
 Branch: 230302
 Current Account
 Reference: Your Child's Name and Surname

FEES

Uniform

Uniforms



SUMMER / SPRING:

Boys - Short Sleeve Golfer & Shorts

Girls - Short Sleeve Golfer & Skorts

AUTUMN / WINTER:

Long Sleeve Golfer

Black Pants

Jersey

Jacket

Tracksuit

Winter Set

PREFECTS:

Blazers



Line 80 *Contact*
Wianie Markram
 **076 070 6735**

Please complete and submit either in person at reception or upload it on the website. Please make sure ALL documents required are also uploaded. Upon successful enrolment the finance office will contact you to come to school to set up your account.

CHILD'S INFORMATION

Surname						
First name						
Nickname						
ID number						
Date of birth						
Gender						
Residential address						
Postal code						
Home language		ENGLISH		AFRIKAANS		SETSWANA
Previous school name and address						
Dexterity of learner (left or right)						
Immunization up to date?						
Medical history						
Allergies						
Medication						
Medication must be given to the teacher in the morning for safe keeping in the refrigerator						

Documents to be submitted with admission

- Copy of both parent's identity documents (Certified).
- Copy of the child's birth certificate (Certified).
- Copy of the child's clinic (immunization) chart
- Proof of residence
- Latest school report
- Bank confirmation letter

PARENTS / GUARDIAN

Mother	Title		Initials		Surname	
	Full name					
	ID number					
	Cell number					
	Email					
	Residential address					
	Postal address					
	City					
	Postal code					
	Occupation					
	Employer					
	Work Address					
	Work number					
	Father	Title		Initials		Surname
First name						
ID number						
Cell number						
Email						
Residential address						
Postal address						
City						
Postal code						
Occupation						
Employer						
Work Address						
Work number						

I hereby acknowledge that all the information above is filled in correctly and to my best ability.

Signature: _____

Date: _____

If there are any enquiries regarding admissions, please email us at admissions@ktcschool.com.

PERSON RESPONSIBLE FOR PAYMENTS

Name:			
Address:			
Email:			
Cell number:			
Work Number:			
Payment options:	Cash ☐	Debit Order ☐	Please fill in attached debit order form if debit order option was selected.
Aftercare		Supervision	

The party signing supra, herewith choose as their domicilia et executandi the addresses mentioned hereinabove, but such domicilium of either party may be changed by written notice from such party to the other party with effect from the date of receipt or deemed receipt by the latter of such notice.

Sign: _____

Date: _____

IN CASE OF EMERGENCY

Name:	
Address:	
Email:	
Cell number:	
Work Number:	

Indemnity

Hereby we as the undersigned parents/guardian of the child, declare that we will not hold the owner/s of the school/Tuition centre responsible for happenings, accidents or hurting of any kind that he/she may get while at the Tuition centre.

Sign: _____

Date: _____

