

info@woodburyschool.co.za - PO Box 395 STUTTERHEIM 4930 - Tel: (043) 555 0425 - www.woodburyschool.co

SEEDLINGS 6 - 9 years (Year I - 3) APPLICATION FORM Applications for 2024 close on the 8th of September 2023. Late applications will only be considered should we have space.

Please note that this form needs to be completed in full, initialled on all pages, and signed by BOTH parents or the legal guardian in FOUR places prior to admission.

All the documents in the Checklist below must accompany the application form:

	CHECKLIST	Tick or N/A	Office Use
1	Completed AND signed Application Form (p5, p7, p10 & p11)		
2	Copy of Child's Birth Certificate or Passport		
3	Copy of Child's Clinic Card (Vaccination Record)		
4	Copy of both Parents' or Legal Guardian's ID Documents		
5	Copy of person responsible for the payment of the fees' ID		
6	Proof of payment of Admission Fee		
7	Previous School Reports (& Evaluations if applicable)		

Kindly drop off the documents in a clearly marked sealed envelope at our Campus OR at Razors (Tiana de Lange) OR Stutt Stationers AND WhatsApp to alert us once done.

Please note that completion of this form and an interview DOES NOT imply acceptance.

Please tell us where you heard about Woodbury:
Why would you like a Montessori-inspired Education for your child?
What is your Worldview or Belief System or Religious Orientation?

1. THE CHILD'S PERSONAL DETAILS

Year & Grade	Intended	
Applying For:	Commencement	
	Date:	
Date of Birth:	Age upon	
(dd/mm/yy)	Commencement:	
Child's Surname:	<u> </u>	
Child's First Names:		
ortita s i ti st i tantes.		
Child's Call Name:		
Cittia's Catt Name:		
NA L		
Male or Female:	Home Language:	
Other Language(s):	Does he/she	
	understand	
	English?	
Identity or Passport	Nationality (if not	
Number:	South African)	
	,	-
(Planned/unplanned, adop birth/caesarean section, p	regnancy & Birthing History: oted/biological, pregnancy complications, prem lanned/emergency caesarean section, hospital/l fussy eater, good/poor sleeper etc.)	
What is his/her Birth	Order? (Only child or oldest/middle/youngest	or 1 st /2 nd /3 rd /4 th etc.)
NA/h at are the a are of	bh a abh an Children (on dan 10) livin a in b	uh a a a un a h a un a
	the other Children (under 18) living in t	ine same nouse
(please include non-si	vungs too)?	

2. THE CHILD's HISTORY (continued)

Who does the Child live with at present? Please list all adults in the same house.
When he are he are the collish are also Come also well from high contil a con-
Who has been the Child's main Care-giver(s) from birth until now?
Has the Child attended any previous Daycares or Schools? If yes, please supply
the names.
Are or were any Developmental Milestones significantly delayed or skipped? If
yes, please give details. (Sitting, crawling, walking, talking, potty-training)
Has the Child been diagnosed with any Special Needs or Syndromes or do you
suspect him/her to be on any Disorder Spectrum? If yes, please give details.
Has the Child been exposed to or been treated or is he/she currently being treated
for any Emotional Upset or Psychological Trauma? If yes, please give details.

3. THE CHILD'S MEDICAL AND EMERGENCY INFORMATION

Name of Emergency Contact Person:	
Landline:	Cell:
Family Doctor:	Telephone:
Medical Aid:	Number:
Has the Child been fully vaccinated? If	no, please give details.
Does the Child currently suffer from an	y Allergies? If yes, please give details.
Does the Child currently suffer from an details.	y Chronic Illness? If yes, please give
Is the Child currently on Medication? If	yes, please give details.
Has the Child suffered from any past S please give details.	erious Conditions or Illnesses? If yes,
What Childhood Diseases has the Child Chickenpox)	had? (i.e.German Measels, Measels, Mumps,
Has the Child had any Surgical Proceddetails.	ures or Operations? If yes, please give

MEDICAL CONSENT						
I,, being the parent/legal guardian of hereby cede my power as						
parent/guardian to act as in loco parentis to the directress of TallTrees Learning						
Community (Pty) Ltd 1	「/A Woodbury Pri	vate School or his/her re	epresentatives,			
should medical treatme	ent/surgery to my	child be deemed necess	ary. As far as I			
know, my child is phys	ically capable of p	participating in the vario	ous activities and			
he/she is in good healt	h and all relevant	medical information is	detailed in the			
form above.						
		T				
Signature of Moth	er/Guardian	Signature of Fath	ner/Guardian			
Full Name in print of Mother/Guardian	Date	Full Name in print of Father/Guardian	Date			
4. OTHER RELEVANT IN		1. 1.11. 2				
Is there a family histor	y of any form of le	earning disability?				
What are the Child's cutoy(s)?	ırrent main intere	sts or favourite activitie	s or favourite			
109(3):						
What is the Child's fav	ourite colour, food	d and drink?				
Does the Child have any strong dislikes?						
Anything else you thin	k is relevant and t	that we should know?				

5. THE PARENTS OR LEGAL GUARDIANS' INFORMATION

	Mother	/Legal G	uardi	an	Father	/Legal G	uardia	n
Full Name and Surname:								
Relationship to Child:		Ι				I	ı	ı
Marital Status:	Married	Divorced	Single	Widowed	Married	Divorced	Single	Widowed
	Access Rights to Child?	Ye	S	No	Access Rights to Child?		25	No
If Divorced or a Single Parent:	Child livi with you		S	No	Child livi with you		es	No
Strigte rarette.	Are you the Legal Guardian	l Ye	S	No	Are you the Legal Guardian	. Ye	es	No
Identity Number:								
Work Telephone:								
Home Telephone:								
Cell phone:								
E-mail Address:								
Residential Address:								
Postal Address:								
Occupation:								
Name of Employer:								
Employer's Address:								
Employer's Telephone Number:								
Work E-mail Address:								
Next of Kin's Name & Contact Number:								

INDEMNITY						
		, acknov	5			
whilst my son/daughte	r,		is attending			
TallTrees Learning Com	nmunity (Pty) Ltd	T/A Woodbury Private S	school, the			
community (which incl	udes, but is not lin	nited to, the parents, dir	ectors or staff),			
cannot accept any liabi	lity for mishap, lo	ss or injury which may b	oe suffered			
during attendance on c	ampus, or during	participation in any excı	ırsions, or extra-			
curricular activities.						
I accept that all reason	able precautions w	vill be taken to ensure th	e safety and			
welfare of our/my child	l and that I shall b	e held responsible for th	e payment of			
medical and/or hospita	l accounts where o	applicable, should any ir	ijury or loss be			
sustained by my child.	I specifically inden	nnify and hold TallTrees	Learning			
Community (Pty) Ltd T/A Woodbury Private School, its directors and staff						
blameless against any	claims of any natu	re arising out of any inj	ury, damage or			
loss sustained in pursu	loss sustained in pursuance of the aforesaid participation.					
I hereby indemnify Tall	Trees Learning Co	mmunity (Pty) Ltd T/A	Woodbury			
Private School, its direc	ctors and staff in r	espect of all occurrences	relating to the			
above.						
Signature of Mother/Guardian Signature of Father/Guardian						
Full Name in print of Mother/Guardian	Date	Full Name in print of Father/Guardian	Date			

6. FEES

6.1 DETAIL OF PERSON(S) RESPONSIBLE FOR TUITION FEES

Person responsible for payment of Tuition Fees:	Father	Mother	Guardian	Other
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If OTHER has been selected, please supply the following information:

Full Names and Surname:		
Relationship to Child:		
Identity or Passport Number	·:	
Work Telephone:		
Home Telephone:		
Cell phone:		
E-mail Address:		
Residential Address:		
Postal Address:		
Occupation:		
Name of Employer:		
Employer's Address:		
Employer's Telephone Number:		
Work E-mail Address:		
Next of Kin's Name & Contact	Number:	

6.2 ADMISSION FEES (10% DISCOUNT applies if 50% is paid by 31 July 2023)

Admission Fees				
Admin Fee (non-refundable)	R100 (Payable upon Submission of Forms)			
Registration Fee (non-refundable)	R900 (Payable upon Acceptance after Interview)			
Deposit (refundable)	R2 965 (Payable on the 1st of December for the New Year or ONE Calendar Month Prior to Commencement Date)			
TOTAL Admission Fees Payable	R3 965 (or R3 568.50)			

Curriculum Supplies	R2 000 p/year (Payable on 1 October)	Art, Technology, Stationery & Printing Supplies	R1 500 p/year (Payable on 1 November)
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TOTAL Annual Supplies Fees Payable	R3 500
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6.3 TUITION FEES

5 - 6 years (GrR)	R2 273 p/month	6 – 9 years (Year1 – 3)		9 - 12 years (Year 4 - 6)	
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6.4 TOTAL AMOUNT PAYABLE (please complete)

DESCRIPTION	AMOUNT	Per Day/Month/Term/Year
Admin & Registration Fee		Once-Off
Refundable Deposit		Once-Off
Annual Curriculum Fee		Per Year
Annual Art & Stationery Fee		Per Year
SUB-TOTAL		
Tuition		
TOTAL		

Payment Option: 1 Annual		l Payment 4 Termly Payments		12 Monthly Payments				
Payment method:	Debi	t Order	Future Dated EFT		Manual EFT	*Dire	ect sit	Cash

LIABILITY FOR FEES					
I/we,					
domicilium citandi et executandi for any correspondence or the service of any court processes at the residential address recorded on the application form and acknowledge liability for all attorney and own client costs, plus collection commission in the event of any outstanding accounts being handed over to the community's attorneys for collection.					
Signature of Mother/Guardian Signature of Father/Guardian			er/Guardian		
Full Name in print of Mother/Guardian	Date	Full Name in print of Father/Guardian	Date		

BANKING DETAILS			
Bank	FNB		
Branch	STUTTERHEIM		
Branch Code	210421		
Account Name	TALLTREES LEARNING COMMUNITY (PTY) LTD		
Account Number	62786804685		
Reference	Child's Name		

^{*}Please note that CASH DEPOSIT FEES will be charged to your child's account

TERMS AND CONDITIO	NS					
/we,, the undersigned:						
	Hereby certify that the information provided by us on this application form is true, complete and accurate.					
=	I Have read the Woodbury website and accept enrolment of our child at the Learning Community according to the Philosophies, policies and conditions laid down therein.					
	Understand that the Learning Community reserves the right in its sole discretion to amend and/or alter any of the provisions of the Woodbury website including the philosophies, policies and conditions.					
-		n Observation Period prior to be				
		e used on the Woodbury website				
	-	ork done by a child are the prope	_			
recordkeeping purposes.	s, workbooks and all wo	ork done by a critic are the prope	erty of woodburg joi			
	u fees are naughle in adv	vance, on or before the first day	of the first term/each term			
		, on or before the first day of ea				
over twelve months (1st Janua		, on or before the first day of each	in month and are payable			
	_	rged on monthly overdue accou	nts.			
☐ Hold ourselves accountable f	or the prompt payment	of tuition fees and for any late p	ayment penalties added			
onto overdue accounts.	, , , ,		,			
□ Understand that Woodbury r	reserves the right to refu	se admission to a child with out	standing fees.			
_		nity is a privilege and that learn				
	•	ked to leave to protect the right				
result in the forfeiture of the de						
□ Understand that tuition fees	are due irrespective of a	bsenteeism due to illness, vacati	on or for any other reason			
whatsoever.			-			
□ Understand that in the event	that I/we wish to remov	ve my/our child from the Learnir	ng Community, one full			
		nity, on or prior to the final day				
attendance.						
□ We understand that failure to do so will result in the forfeiture of the deposit, in addition to being liable for one						
full term's fees in lieu of notice	·.					
□ Undertake to ensure that my/our child is punctual at the beginning of each day and is collected on time at the end of each day.						
□ Undertake to reimburse Woodbury for any damage to community property that may be caused by my/our						
Child.						
□ Understand that while every reasonable effort will be made to prevent losses or damage to my/our Child's						
clothing and equipment, the community cannot be held liable.						
Signature of Moth	er/Guardian	Signature of Fa	ther/Guardian			
Signature of Hotel	er, addratait	Signature of ra	iner j duar aturt			
Full Name in print of	Date	Full Name in print of	Date			
Mother/Guardian	Date	Father/Guardian	Date			