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Hammanskraal

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TWEENSY WEENSY ADVENTURERS ADMISSION APPLICATION FORM (2026)

| LEARNER'S DETAILS | | |
|---|-----|----|
| Enrollment Date (Date which you intend your child to start) | | |
| Where have you heard about us | | |
| Surname | | |
| Full Names (As per birth certificate) | | |
| Identity Number (ID) As per the birth certificate | | |
| Nationality | | |
| Race | | |
| Gender | | |
| Date of Birth (DD/MM/YY) | | |
| Current age | | |
| Enrolling Grade (e.g. R, 00, 000, 0000) | | |
| Previous School contact details (info Compulsory) | | |
| Reason for leaving the previous school | | |
| Home language | | |
| Nationality | | |
| Do you require daily aftercare service? (daily rate) | Yes | No |
| Residential Address (compulsory) Proof of Residence to be provided. | | |
| Postal Address | | |
| Contacts: Cell/Telephone numbers | | |
| Contagious Illness already had | | |
| Is your child on any Chronic medication? (Provide full details) | | |
| Does your child require any special medical needs, or have any disabilities? (provide full details) | | |

| | |
|--|--|
| Any allergies you are aware of (This is very important. Even if there are no allergies known at the time, please do indicate that. | |
|--|--|

| | |
|---|--|
| Does your child's immunization record up to date? Yes or No (Provide details. Attach the recent version of the immunization card. | |
| Doctor's Contact details- Compulsory (Tel numbers & emails – GP & Specialists) | |
| Medical Aid Details-Medical Aid Member number, main member, option & your child's dependent code (Provide a copy) | |

| PARENTS'S DETAILS (Compulsory) | | |
|--|--------|--------|
| | Father | Mother |
| Parent/ Person responsible for school fees (Tick- Compulsory) | | |
| Surname | | |
| Initials | | |
| ID Numbers | | |
| Parent living with the child (Tick) | | |
| Occupation (compulsory) | | |
| Work Address | | |
| Telephone Work | | |
| Cell phone (Compulsory) | | |
| Email Address (Compulsory) | | |
| Marital status | | |
| Religion | | |
| DETAILS OF PEOPLE ENTRUSTED TO COLLECT THE CHILD, INDLCUDING PRIVATE TRANSPORT (PREFERABLY AN ADULT) | | |
| Name & Surname | | |
| Physical Address | | |
| Postal Address | | |
| Contact details: cellphone/Telephone | | |
| Email address: | | |
| Relationship with the Child | | |

| | |
|---|--|
| EMERGENCY CONTACT DETAILS OR NEXT OF KIN | |
| 1.Name & Surname | |
| Relationship with the child | |
| Cellphone/Telephone number | |
| Email Address | |
| 2.Name & Surname | |
| Relationship with the child | |
| Cellphone/ Telephone number | |
| Email Address | |

Mother's Signature

Date _____

Father's Signature

Date _____

For official use (On Behalf of the School) _____ **Date** _____

SIGNATURE OF THE PARENT/ GUARDIAN/ ACCOUNT HOLDER

I/we , the undersigned (print)_____ ID No _____

being the parents or guardians of a child/ Children:_____

do hereby indemnify and hold harmless Teensy Weensy Adventurers (Pty) Ltd and its members or employees and or representatives or acting agents in good faith or anyone entrusted to help out at school, against all liabilities, claims for damages(patrimonial or non-patrimonial) arising out of any injury or loss sustained by reason of the use of the school's premises or equipment or as a result of anything not maliciously done or omitted by the said Centre or any of its members or entrusted parties, during such time as my said child(ren) attend(s) the school, on or off the premises.

Furthermore, I/we give permission to the school to take my child on outings or excursions organized by the Teensy-Weensy Adventurers which will be pre-arranged and pre-communicated. I also give permission or consent to the school to take medical action in the event of any injury or illness (critical medical situation) at the expense of the parent/guardian if the school is unable to contact me. In the light of the latter, the school therefore reserves the right to utilize the quickest medical service available. The terms of this consent and indemnity will be applicable for the duration of the time that my child/children is/are enrolled at Teensy Weensy Adventurers.

As per the above, names Identity numbers and signatures below, I/ we hereby certify that the information provided for admission is complete and accurate. I/We acknowledge that that the enrollment is subject to, inter alia, signing the admission contract that contains terms and conditions and requirements for admission. We also authorize the school an or any of its associates to conduct any credit enquiries on us as maybe necessary from time to time. We acknowledge that we have read and familiarize ourselves with school specific policies, rules and regulations. We /I will accept an offer of placement for our child at the school in accordance with the school terms and conditions. These documents as amended from time to time are available on the official school website or directly contact the school if the need arises.

I/we understand that the responsible person will take reasonable precautions to ensure the safety and well- being of my/our child.

Signature: Parent/ Guardian (1) _____ Date _____

Signature: Parent/ Guardian (2) _____ Date _____

Signature: Authorized School Representative _____ Date: _____

COMPULSORY SUPPORTING DOCUMENTS

NB. The application will only be processed if all the fields on the application form are completely and legibly signed with all necessary supporting documents attached. You are requested to initial all the pages of the admission application form including this page.

Below are the supporting documents required, kindly ensure that all documents are attached.

1. Certified Copy of an Unabridged Child Birth Certificate
2. Certified copy of Child's immunization clinic card record
3. Copy of proof of residence e.g. Municipal Bill or confirmation by Tribal office or Lease Agreement
4. Certified copies of both parent's Identity Documents (Father, Mother or legal guardians)
5. 2 recent color ID or passport photos (To be attached on the first page of the forms)
6. Deposit slip (Proof of Payment (POP) of Non- Refundable Registration Fee R 1 200. 000
7. Deposit Slip (POP) for Monthly school fees
 - Children between 7-11 months - R1780
 - Children in diapers/ nappies from 12 months onwards: R1510
 - Children not in diapers/ nappies: R1360
8. Proof of Employment or 3 months bank statement of the Account Holder

N.B Proof of payment for Registration, school fees and uniform to be attached. Each payment should be referenced accordingly e.g. Child's name and surname - Uniform

Child's name and surname – Registration fee

Child's name and surname – School fees

OUR BANKING DETAILS: please note that Teensy Weensy Will never send an email advising change of our banking details. Any such email would be fraudulent.

Bank: First National Bank

Account Holder: Teensy Weensy
Adventurers (PTY)

Account No: 62658508258

Branch: Carlswald

Branch Code: 250117

Send the proof of payment to: Teensyweensy.adventurers@gmail.com or send WhatsApp to 082 739 5934 or 071 557 068

Sign and initial each page of the form including this one