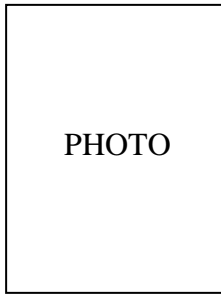




Registration Form

2017



68 Mills Street
STRAND, 7140

Tel 021 854 5905
Cell +27 84 795 8193

E-mail: admin@nlaschool.com
Website: www.nlaschool.org

STUDENT PARTICULARS

SURNAME _____ FIRST NAME _____

DATE OF BIRTH _____ ID.NO _____ GRADE _____

RESIDENTIAL ADDRESS _____

TEL. (H) _____ STUDENT CELL _____

LAST SCHOOL ATTENDED _____ TEL _____

PERSON LIABLE SELF FATHER MOTHER GUARDIAN

NAME & SURNAME _____

HOME ADDRESS _____ (As chosen domcillium citandi et exectandi)

EMPLOYER _____

WORK ADDRESS _____

TEL (H) _____ (W) _____

CELL PHONE _____ (FAX) _____

ID NO _____

E-MAIL ADDRESS WHERE ACCOUNT SHOULD BE SENT: _____

E-MAIL ADDRESSES FOR ALL OTHER RELEVANT INFORMATION: _____

METHOD OF PAYMENT: (PLEASE TICK) DEBIT ORDER INTERNET CASH CHEQUE TERM ONCE-OFF

DEBIT ORDER PAYMENTS		CASH/CHEQUE/INTERNET PAYMENTS	
1 X First Instalment (At registration)	= R 5 065	1 X First Instalment (At registration)	= R 5 555
11 x Monthly Instalments (R5 065)	= R 55 715	11 x Monthly Instalments (R 5 555)	= R 61 105
Total 2016 Class Fees	= R 60 780	Total 2016 Class Fees	= R 66 660
1 % handling fees must be added for cash/cheque payments & cash deposits			
ONCE-OFF PAYMENT BEFORE 04/01/2017 = First Instalment: R 5 065, balance before the due date: R 52 635 (Total: R 57 700)			
TERM PAYMENT = First Instalment: R 5 065, four payments of R 13 533 (By 4 January, 4 April, 4 July, 4 October 2017) (Total: R 59 197)			

FOR THE ABOVE REGISTERED STUDENT, I HEREBY UNDERTAKE TO PAY THE FIRST INSTALMENT OF R..... AT REGISTRATION AND THE REMAINING BALANCE IN
..... EQUAL INSTALMENTS OF R....., TOTALLING THE AMOUNT OF R.....

We, the undersigned, hereby certify that we take note of, understand and agree to the terms of agreement set out on the form titled Finances and Terms of agreement. We also give permission that our credit records can be accessed by the school administration.

Safeguard: The signatory of this document hereby indemnifies the Natural Learning Academy and all of its employees from any liability howsoever arising in respect of any loss of, or damage to any property belonging to or in possession of yourself or your child; or any loss or damage incurred as a result of any injury of whatsoever nature sustained by yourself or your child, irrespective of the cause of the injury, whilst you or your child receives tuition, is under reasonable supervision and control, or participates in, or is present at our premises without supervision outside of class hours, or is otherwise involved in any activities of the Natural Learning Academy.

DATED AT _____ ON THE _____ DAY OF _____ 20____

SIGNATURE FOR CODE OF CONDUCT (STUDENT)

SIGNATURE (PERSON LIABLE FOR ACCOUNT)

FULL NAME (PERSON LIABLE)

FULL NAME OF OTHER PARENT/GUARDIAN

CONTACT DETAILS

SIGNATURE OTHER PARENT/GUARDIAN