



Gryphon House

INDEPENDENT PRIVATE SCHOOL

APPLICATION FORM

Grade applying for: _____

Year of entry: _____

LEARNER DETAILS:

Learners Surname:

Learners Full Names (as per Birth Certificate):

Learner Resides with	Mother	Father	Guardian	Both Parents
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Physical Address (where learner resides):

Postal Address:

Telephone Number:

Current Age:

Date of Birth:

Gender:

Student ID Number:

Student Passport Number:

Home Language:

Other Language:

South African Citizen

YES

If NO – Country of birth:

NO

Immigration Date:

Siblings already enrolled at Gryphon House

1.

2.

3.

Position in family

INFORMATION OF PREVIOUS SCHOOL:

Present Grade:

Name of School:

School Address:

School Tel No.:

School Fax No.:

Annual School Fees:

R

Contact in Finance Department

This entire document must be completed in full, with all the relevant and required information. All changes are to be signed or initialled by parent/guardian. Completing the form does not necessarily mean that the learner has been accepted into the school.

NOTE: Withholding or false declaration of information will nullify any decision of admission to this school. If we cannot contact you at the address and or telephone numbers supplied, this application will be cancelled.



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PARENT INFORMATION: BIOLOGICAL MOTHER:			
Surname		Full Names	
Ms /Mrs /Dr /Prof		ID Number	
Residential Address	_____	Postal Address	_____
	_____		_____
	_____		_____
Postal Code		Postal Code	
Cell Number		Phone (h)	
Employer		Occupation	
Tel (w)		WhatsApp no:	
Work Address			
E-mail address			
Marital Status		Married / Widowed / Divorced / Separated / Single / Traditional	
Name, Address, and Telephone number of Relative or Friend:			
PARENT INFORMATION: BIOLOGICAL FATHER:			
Surname		Full Names	
Mr / Dr / Prof		ID Number	
Residential Address	_____	Postal Address	_____
	_____		_____
	_____		_____
Postal Code		Postal Code	
Cell Number		Phone (h)	
Employer		Occupation	
Tel (w)		WhatsApp no:	
Work Address			
E-mail address			
Marital Status		Married / Widowed / Divorced / Separated / Single / Traditional	
Name, Address, and Telephone number of Relative or Friend:			



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GUARDIAN INFORMATION:			
Surname		Full Names	
Mrs / Mr /Dr /Prof		ID Number	
Residential Address	_____	Postal Address	_____
	_____		_____
	_____		_____
Postal Code		Postal Code	
Cell Number		Phone (h)	
Employer		Occupation	
Tel (w)		WhatsApp no:	
E-mail address			
Work Address			
Reason for learner residing with a guardian?			

MEDICAL AID DETAILS:	
Name of Medical Aid	Medical Aid No.
Main Member Details	
Name of Doctor	Tel. No. of Dr.
Allergies	Disability
Emergency Contact other than parents	Name :
Tel / Cell No.	
Relationship to Learner	

SCHOLASTIC INFORMATION:	
Has the child ever been expelled, dismissed, suspended, or refused admission to another school?	
Has the child ever had any disciplinary difficulties?	
If yes, give details.	
Reason for selecting this school.	
Sport, Cultural, and Academic colours achieved:	Please indicate below:



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THE FOLLOWING DOCUMENTS ARE TO BE HANDED IN WITH YOUR APPLICATION

1 x recent photograph – ID size	Copy of learner's last year-end report
Copy of learner's birth certificate	Copy of learner's last term report
Copy of immunization card	Copies of any relevant assessments
Proof of residence - either telephone / municipal rates account	Copies of both parent's ID documents
All documentation signed & Policies Booklet received.	Copy of updated school account

Please note: Applications are deemed incomplete without all the above-mentioned documentation.

Payments: The school fee payments may be made termly and monthly in advance on or before the 1st of the month.

Sibling discount: The eldest child in the family pays the listed tuition fees. Sibling discounts will be applied as per the fee structure.

Outstanding Fees: If fees are in arrears, the school reserves the right to take the necessary steps as per the conditions of the contract.

Notice Period: A Calendar month's notice is required for students who joined the school within 1 – 3 months of attendance and a full term's written notice is required for students attending longer than 3 months if you intend to remove your child from the school. This notice must be written and handed in during the last week of the month before the notice month or of the term before the notice term.

The Account Holder undertakes to give the school thirty (30) calendar days' written notice of termination of the enrolment of all primary school additional services, i.e. aftercare, transport, etc. failing which, the account holders and the surety and co-principal debtor shall be liable for the full amount of the tuition fees for the following month.

Photographs: I understand and acknowledge that, from time to time, informal photographs are taken of the school's children, and that, insofar as these photographs are placed in the possession or control of the school, these photographs might be used by the school in the electronic and/or printed media, including the school's website, newspaper advertisements, magazine advertisements, brochures, flyers, posters, billboards, banners, flippers and signage on buildings and vehicles, which use will be solely for purposes of marketing the school. As all marketing material of the school portrays excellence, the school will at all times, insofar as the use and publication of photographs are placed in the control of the school, ensuring that these photographs are used in good taste.



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Please note that the school has the right to carry out credit checks. AGREEMENT:

I/We accept full responsibility for the payment of school fees monthly in advance for the year.

- Should my child/children leave the school for any reason, whatsoever, I will give a full calendar month notice, failing which I will be liable for the school fees for the notice period.
- I agree that my child adheres to the academic, Christian, and disciplinary regulations of the school and accept that, as a Christian school, Gryphon House has no obligation to other religions, festivals, holidays, or practices.
- By signing this agreement, I agree to all the rules and regulations of Gryphon House.
- I agree to the school's Financial Policy, Code of Conduct, Indemnity Policies, and Admissions Policy.
- I hereby give my permission to Gryphon House to conduct a financial screening.

I/We declare that the above particulars are true and correct and that I/we have read and understood the contents. All clauses have been read and understood clearly.

Signature of Father	Signature of Mother	Guardian Signature	Date
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PLEASE NOTE:

SCHOOL FEES ARE PAYABLE MONTHLY IN ADVANCE AND THE SCHOOL LOOKS TO BOTH BIOLOGICAL PARENTS FOR PAYMENT OF SCHOOL FEES, IRRESPECTIVE IF PARENTS ARE SINGLE, MARRIED, SEPARATED, DIVORCED, REMARRIED, MARRIED CUSTOMARY LAW ETC.

ACCOUNTABLE PERSON – Please give details of who is responsible for school fees

Surname		Full Names	
Mrs / Mr / Dr / Prof		ID Number	
Residential Address	_____	Postal Address	_____
	_____		_____
	_____		_____
Postal Code		Postal Code	
Cell Number		Phone (h)	
Employer		Occupation	
Tel (w)		WhatsApp no:	
E-mail address			
Work Address			
Relationship to Learner			
Parents deceased?	Mother	Father	
Fees paid by Trust	Yes	No	
Name of Trust			
Contact Person			



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I/We declare that the above particulars are true and correct and that I/we have read and understood the contents. All the clauses have been read and understood clearly.

I/We have received the School Policies booklet and I/we have read, understood, and explained it to my/our child/ren. I/We agree to honour and adhere to the School Policies as set out in the booklet.

Signature of Father	Signature of Mother	Guardian Signature	Date
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