smart academy
your peace of mind is our priority

Smart Academy Learning Centre (Pty) Ltd 2017/337042/07

16 Stamford Road, Kibler Park Cell: 083 303 9549

1. The account holder undertakes to give 30 calendar days written notice of termination of the enrolment of a learner. If notice is given in November, December fees will still be payable.
2. In the case of a learner being absent for health or any other reason there will be no reduction in fees.
3. Should the account be in arrears, the centre reserves the right to suspend attendance until such time that the account is up to date.
4. The centre shuts down annually over the December/ January holiday period and will give sufficient notice of the dates.
5. Fees will be reviewed on an annual basis.
6. A penalty will be charged for children that are collected late as follows**: -** ***R20 per 5 min after 18:00pm until 18:20 thereafter R50 per 5 mins.*** Late collection penalties will be added onto the account and are not to be paid directly to staff members.
7. Payments of monthly fees are not subject to presentation of a statement. Payments are to be made in accordance with the fee structure.
8. In the event where the centre takes legal action against the account holder, he/she shall be liable for all legal fees on an attorney client scale, collection costs and commission, interest and tracing fees.
9. Cash deposit fees will be the responsibility of the account holder. Cash payments are to be made directly to the centre
10. Monthly fees are payable in advance by the 3rd of the month

Registration	**Full Day**		**Half Day**		**Payment Date**
	1st Child	Sibling	1st Child	Sibling	
R350.00	R 4000.00	R 3750.00	R 3250.00	R 3050.00	3rd Jan – 3rd Nov 2026

Grade 1 – 3	Grade 4	Grade 5	Grade 6	Grade 7
STAT - R650	STAT - R750	STAT - R800	STAT - R800	STAT - R850

I, _____parent/guardian of _____have read and understand the terms of this contract and do hereby agree to the terms and accept full responsibility for the account.

Name: _____ ID: | | | | | | | | | | | | | |

Signed: _____ Date: | | | / | | | / | 2 | 0 | 2 | |

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Learning Centre Application/Registration Form

Please Note-

This form must be signed and completed in full by the learner's parent/guardian prior to admission to the school. All documents and forms listed below must be produced BEFORE admission can be confirmed.

1.	Copy of learner's birth certificate	
2.	Copy of parents' ID documents	
3.	Copy of immunization certificate	
4.	Copy of medical aid card	

Learner's Details:

Learner's Surname:		Boy / Girl:	
Full Name/s:			
Preferred Name:			
Date of Birth:		Previous School:	
ID Number:		Citizenship:	
Country of Birth:			
1st Language		2nd Language	

Emergency Contact No:

Name:		Contact No:	

Medical Aid Details:

Med Aid:		Medical Aid No.	

Allergies or Special conditions:

Parent/Guardian Information

Mother/Guardian		**Father/Guardian**	
Title:		Title:	
Surname:		Surname:	
Name:		Name:	
ID Number:		ID Number:	
Occupation:		Occupation:	
Employer:		Employer:	
Employer's Address:		Employer's Address:	
Work No:		Work No:	
Cell No:		Cell No:	
Email:		Email:	
Physical Address:		Physical Address:	

Please tick if applicable:

I grant permission for images of my child to be posted on class communication groups. Y/N

I grant permission for images of my child to be used in promotional content. Y/N

Details of person responsible for the account

Surname:		Name:	
ID Number:		Email:	
Cell No:		Work No:	

I, _____ parent /guardian of _____
do hereby verify that the information provided above is true and correct.

Signed:_____ Date:_____