



368 MOROLONG SECTION
KGABALATSANE VILLAGE
081 887 3059
info@legaelabanaprimery.co.za
admin@legaelabanaprimery.co.za

LEGAE LA BANA PRIMARY SCHOOL

LEGAE LA BANA PRIMARY SCHOOL 2026 APPLICATION FORM

DETAILS OF THE LEARNER:

GRADE APPLIED FOR: _____

Learner's surname: _____ Learner's name: _____

Date of Birth: _____ Sex: _____

Attach Photo of learner (ID Copy size)

DETAILS OF PARENTS

Father's Name & Surname: _____ ID No. _____

Contact number: _____

Home Address: _____

Mother's Name & Surname: _____ ID No. _____

Contact number: _____

Home Address: _____

Contact Person in case of emergency:



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Name: _____ Contact No: _____

TERMS AND CONDITIONS:

IMPORTANT NOTICE:

By signing or initialling or otherwise entering into this Contract you agree to the terms and conditions contained in this document as well as any terms and conditions which form part of this Contract. **If there is any provision in this Contract that you do not fully understand, please ask for an explanation before signing.**

ADMINISTRATION & FEES:

- 1. You have absolute responsibility for the payment of any Fees applicable to your Child attending at LEGAE LA BANA PRIMARY SCHOOL.** You also acknowledge that School Fees are payable ONE month in advance. If you are unclear about any of your financial obligations, PLEASE VERIFY WITH THE PRINCIPAL and/or ADMINISRTRATOR.
2. Fees as per Fees Structure will be provided.
3. Monthly Fees must be paid **in full by the 5th of every month.**
4. If fees are not paid by the 6th of the month, PENALTY of **R100** is imposed.
5. A full months' fees are payable even if your child leaves during the course of the month.
6. Registration fee of R500.00 is payable for new applications and R300 .00 is payable for re-registration per child. **THIS FEE(S) IS NON-REFUNDABLE**
7. Parents are liable for fees whether or not the child has attended the full month's quota of days. Unfortunately, there will be no rebate for missed days.
8. Fees for December and January are paid in full.

If you wish to terminate your contract or withdraw your child from LEGAE LA BANA PRIMARY SCHOOL, we require one calendar month's written notice. This calendar month's written notice will only apply from January to the first day of October. If you wish to terminate the contract or withdraw your child from LEGAE LA BANA after the 1st of October, you will be liable for the fees of November and December.

Parent/Guardian Signature: _____



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Witness: _____

GOVERNANCE

1. All activities and outings are compulsory, and will be paid for by parents as and when such activities are arranged.
2. Activities or Operations may be suspended due to:
 - An unforeseen and unfortunate circumstance taking place around the area/community.
 - Conditions beyond the school's control.
 - School's management decision if it for the best and safety of the leaners.

Parent/Guardian Signature: _____

Witness: _____



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INDEMNITY FORM

I, the undersigned, herewith apply for admission of my child,

to LEGAE LA BANA PRIMARY SCHOOL, and should my application be successful, I undertake to do the following:

1. I, as the natural guardian of the above named child on behalf of myself, my assigns, heirs and executors, hereby indemnify employees of LEGAE LA BANA PRIMARY SCHOOL from any liability or damage whatsoever and any legal expenses or costs which may arise from any claim as a result of the death of the above child arising from sickness or of injury which the said child might have contracted or sustained during their vacation at the School, except where such injury, illness or damage is as a result of the unlawful and intentional negligence of the School or an employee of the School.

2. I undertake to have the above child immunised against all infectious diseases and children's diseases at admission and to give proof of immunization to the person in charge at the School.

3. I hereby state that I will not hold the employees of LEGAE LA BANA PRIMARY SCHOOL responsible for any accident that may occur while my child is in transit, except where such injury, illness or damage is a result of the unlawful and intentional negligence of the School or an employee of the School.

4. I, further undertake to abide by the rules laid down by LEGAE LA BANA PRIMARY SCHOOL or which may be issued from time to time.

5. In addition to the above, I undertake to pay all fees as required by the School for my child.

6. Lastly, I grant the principal and/or staff my consent to obtain whatever medical treatment that might be necessary during an emergency where I shall not be immediately or timeously able to grant consent in person.



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Signed at on the ___ day of _____ 20___.

Parent/Guardian Signature: _____

Witness.: _____

PLEASE ATTACH THE FOLLOWING DOCUMENTS TO THIS APPLICATION:

1. Copy of Birth Certificate of the child
2. Copy of immunization certificate of the child
3. ID copy of Parent(s)
4. Proof of residence
5. Referral letter if the child is from another school
6. Progress report from previous school.

Signature of Administrator: