Kingdom Babies

51 Goedemoed Street, Goedemoed, Durbanville, 7550
Tel : (021) 976 2012
E-mail: admin@kidskingdom.co.za
Registration No. C15/5/13/2C.4862
Web Site: kidskingdom.co.za

ENROLMENT FORM

NAME OF CHILD _____ SURNAME _____

DATE OF BIRTH _____ RELIGION _____
(COPY OF BIRTH CERTIFICATE TO BE ATTACHED)

ADDRESS _____ HOME LANGUAGE _____

_____

_____ PHONE (H) _____

FATHER'S FIRST NAMES _____ E-MAIL _____
& I.D. NO (COPY OF I.D. TO BE ATTACHED)

_____ PHONE (W) _____

OCCUPATION _____

MOTHER'S FIRST NAMES _____ E-MAIL_____
& I.D. NO (COPY OF I.D. TO BE ATTACHED)

_____ PHONE (W) _____

OCCUPATION _____

WHEN WOULD YOU LIKE
YOUR CHILD TO START? _____

DATE OF APPLICATION _____

An enrolment fee of R750.00 (non-refundable) is payable to ensure admission.

WHAT TIME WILL YOU BE FETCHING YOUR CHILD:

BABY CLASS (3 – 18 MONTHS)	
13H00 3 x Days per week	
18H00 3 x Days per week	
13H00 5 x Days per week	
18H00 5 x Days per week	

TODDLERS (18 MONTHS – 2 ½ YEARS)	
12H30 (3 x Days per week)	
12H30	
13H00	
14H30	
18H00	
BREAKFAST (an extra R150 per month)	

IS YOUR CHILD ALLERGIC TO ANY MEDICINES / FOODS_____?

WHO WILL BRING THE CHILD TO SCHOOL_____?

WHO WILL FETCH THE CHILD FROM SCHOOL_____?

PERSONS TO CALL IN CASE OF EMERGENCY:

_____ PHONE _____

_____ PHONE _____

PERSONAL DOCTOR'S NAME _____ PHONE _____

CHRISTIAN TESTIMONY

Your Place of Worship _____

Church and Denomination _____

DO YOU HAVE ANY OBJECTION TO YOUR CHILD BEING NURTURED AND TAUGHT ACCORDING TO CHRISTIAN PRINCIPLES?

_____

SIGNED _____
FATHER / MOTHER / LEGAL GUARDIAN

Kingdom Babies Mission

At Kingdom Babies, we are committed to providing a nurturing, loving, and faith-filled environment for babies and toddlers, ensuring their early experiences lay a strong foundation for lifelong growth and joy.

Our mission is to:

1. Create a warm and secure space where each baby and toddler feels cherished and valued.
2. Offer age-appropriate care and learning opportunities to foster curiosity, new skills, and joyful exploration.
3. Teach love and respect for God, others, and the world in meaningful ways.
4. Support emotional, social, and physical development through play, gentle guidance, and individualised attention.
5. Partner with families in shaping a wholesome, Christ-centered beginning for their little ones.

We believe that every small step leads to big growth, and every giggle is a sign of God's love at work.

YOUR MARITAL STATUS

MARRIED _____ DIVORCED _____ WIDOW / ER _____

NAME & AGES OF OTHER CHILDREN:

WHAT INFECTIOUS DISEASES HAS THE CHILD HAD:

_____

_____

_____

HAS THE CHILD BEEN IMMUNISED AGAINST:
COPY OF VACCINATION CARD TO BE ATTACHED (IF APPLICABLE)

POLIO	YES	NO	N/A
DIPHTHERIA	YES	NO	N/A
WHOOPING COUGH	YES	NO	N/A
MEASLES	YES	NO	N/A

PHYSICAL FINDINGS TO BE WATCHED AT SCHOOL:

_____

_____

_____

_____

_____

MILESTONES: AT WHAT AGE DID YOUR CHILD REACH THE FOLLOWING STAGE IN HIS / HER DEVELOPMENT

CRAWL _____ WALK _____ TALK (WORDS OR BABBLING) _____ [N/A]

HAS YOUR CHILD ANY OF THE FOLLOWING IMPEDIMENTS:

_____

_____

_____

IS THERE A FAMILY HISTORY OF ANY OF THE FOLLOWING?

DEAFNESS _____

DYSLEXIA _____

IS THERE ANYTHING SPECIAL WE SHOULD KNOW ABOUT YOUR CHILD?

_____

_____

HAS YOUR CHILD ATTENDED A PLAY CENTRE?

NAME & ADDRESS _____

_____

TELEPHONE NUMBER _____

FOR HOW LONG _____

HOW DOES YOUR CHILD RELATE TO OTHER CHILDREN? (IF APPLICABLE)

_____

KINGDOM BABIES

MONTHLY PAYMENT OF SCHOOL FEES

Fees are payable in **10 equal instalments**. If your child joins us **from 1 August onwards**, the **casual rate** will apply for the days attended in December.

For security reasons, we operate on a **strict "no cash" policy**. We kindly ask all parents to make use of **EFT payments** when settling school fees.

Banking Details
ABSA, Account Number: **1410158872,** Branch Code: **632005**
Please use your child's name and surname as the payment reference.

Your cooperation with these guidelines ensures the smooth and efficient running of our school. Thank you in advance for your support.

Parent Agreement

1. I agree to pay **10 equal instalments** of **R _____** in advance. Payments are due **from 1 February to 1 November**. No payments are required on **1 January** or **1 December**.
   A **12-month payment plan** is also available upon request. **[YES PLEASE]**
2. I agree to pay fees **by the 1st of each new month**. Should I require an alternative payment date, I will submit a request **in writing**.
3. I agree that **school fees remain payable** even when my child is absent due to illness or when our family is away on holiday.
4. I agree to inform the principal **in writing** if I am unable to meet my monthly fee commitment. I understand that if no arrangement is in place by the **30th of the month**, my child may not attend school until the account is settled.
5. I agree that, should my account be handed over for collection, **I will be responsible for all legal costs**.
6. I agree to give **one full calendar month's notice** should I wish to withdraw my child from the pre-school.
7. I acknowledge the school's **no cash policy** and will make suitable arrangements for EFT payments.

SIGNED _____

DATE _____

PERMISSION & INDEMNITY

I, the undersigned,.....

Of.....
Address

Being the parent / guardian of.....
Name of Scholar

hereby agree that my son / daughter may take part in all activities of Kingdom Babies, inclusive of plays and physical exercise.

I understand and accept that all such activities be undertaken at the sole risk of my son / daughter and that I, in my abovementioned and personal capacity, my executors, my spouse and the above-named child hereby indemnify the supervisors, the teachers and the School Board of all and any losses or damages as well as injuries to my above-mentioned child which may occur from any of the fore-mentioned activities. I acknowledge that the principal and her staff will take all reasonable precautions to ensure the safety of my child.

The School has a Website and a Facebook page, which may contain images of our children from time to time. Please let us know if you do not want your child included on social media.

FATHER / GUARDIAN ..... DATE .....

MOTHER / GUARDIAN ..... DATE .....