

DUNVEGAN NURSERY SCHOOL ASSOCIATION

25 Frances Street, Cnr Dunvegan Avenue, Edenvale, 1610 | P.O. Box 305, Dunvegan, 1610.

Telephone: (011) 453-7969 | www.dunvegannurseryschool.co.za



Thank you for allowing us the opportunity of offering our services to you.
We look forward to welcoming you into the Dunvegan Nursery School family.

Dunvegan Nursery School was established in 1955 as a PBO (Public Benefit Organisation). There is no owner to draw profits from your child's fees. Parents of current pupils are all members of the association. Volunteers form an Executive Committee, to support the staff and to make financial decisions on behalf of the parents.

Parents also form a Fund Raising Committee to raise funds for special projects and the continual improvement and upgrade of the facilities for their children. Parents are most welcome to become as involved as they wish in the school.

We herewith enclose our application documentation. Please contact us with any further queries you may have.

Patsy Whelan Administrator

Cindy Keet Principal

Email: admin@dunvegannurseryschool.co.za

DUNVEGAN NURSERY SCHOOL ASSOCIATION

25 Frances Street, Cnr Dunvegan Avenue, Edenvale, 1610 | P.O. Box 305, Dunvegan, 1610.

Telephone: (011) 453-7969 | Email: admin@dunvegannurseryschool.co.za

www.dunvegannurseryschool.co.za

Child Surname :			
First Names :			
Date of Birth :	Sex :	I.D. Number :	
Nationality :	Religion :	Home language:	
Family unit in which the child lives (e.g. parents, divorced /step parents, siblings, etc.)			
Residential address :			
Postal address :			
Previous School :			
FATHER (Full Names)			
ID Number :		E-Mail :	
Occupation :			
Company name :		Hours :	
Company address :			
Telephone work :		Cell:	
MOTHER (Full Names)			
ID Number :		E-Mail :	
Occupation :			
Company name :		Hours :	
Company address :			
Telephone work :		Cell:	
Person who can be contacted for payments			
EMERGENCY CONTACTS : (If parents are not available)			
Name		Name	
Relationship to child		Relationship to child	
Telephone		Telephone	
DOCTOR :		Telephone :	
Address :			
Medical Aid details :			

ALLERGIES / IMPORTANT INFORMATION :		
COLLECTION ARRANGEMENTS :		
REFERRED BY :		
Half Day :	Full Day :	Sleep : Y N
Application Date :		Proposed Entry Date :

This application does not guarantee a place in our school for your child as we operate on a waiting list system. All children must be immunised against Diphtheria, Polio and Whooping cough before admittance to Dunvegan Nursery School.

We the undersigned hereby make application for the admission of our child as a pupil of Dunvegan Nursery School and confirm that acceptance of our child/ children is subject to the conditions set out herein. Should my application be successful, I undertake to:

- 1.) Abide by the school constitution and regulations in force.
- 2.) Pay the monthly school fees monthly in advance. Regarding the payment of fees, the following shall apply:
 - a) The signatory hereto shall be liable for payment of the school fees, levies and other imposts from time to time
 - b) Should there be two signatories to this application, they shall be liable, jointly and severally, the one to pay, the other to be absolved.
 - c) All arrears in terms of my/our child/children's fees or other costs shall attract interest at the rate of 2% above prime per annum.
 - d) In the event of non –payment, I /we undertake to pay costs as between attorney and client, collection commission at the prevailing rate and tracer costs, if required, in the event of my/our account being handed over to attorneys for collection.
 - e) I/ we choose our respective addresses as domicilium citandi et executandi for purposes of the service of court process in the event of non payment
- 3.) Advise the school in writing should our address or telephone details change.
- 4.) Give a calendar month's notice in writing should I / we wish to remove my/our child from the school, or pay a month's fees in lieu thereof.

The Dunvegan Nursery School Association reserves the right to suspend a pupil's access to the school and or activities in the event of non-payment.

I CONFIRM HAVING READ AND UNDERSTOOD THE ABOVE.

Signature of Father/ Guardian _____ **Date** _____ **Signature**
of Mother/Guardian _____ **Date** _____

DUNVEGAN NURSERY SCHOOL ASSOCIATION

25 Frances Street, Cnr Dunvegan Avenue, Edenvale, 1610 | P.O. Box 305, Dunvegan, 1610.

Telephone: (011) 453-7969 |

PARENT CONSENT AND INDEMNITY FORM

- 1.) I, (parent/ guardian's full names) _____
of (address) _____
being the parent / legal guardian of (full names of child) _____
hereby request that my child/ren be allowed to participate in any tours/trips/walks (hereafter referred to as "outings") organised by Dunvegan Nursery School and to partake in usual daily school activities.
- 2.) In the event of a medical or life threatening emergency, I hereby appoint and authorise the teacher in charge to act "in loco parentis" in my stead and with my full authority and consent, and give my permission that my child /ren undergo surgical or any other emergency treatment which in the opinion of the teacher in charge is necessary. Every effort will be taken by the teacher in charge to make contact with the parents/ guardians in the first instance. I further undertake full responsibility for any costs thereby incurred.
- 3.) I fully understand and accept that all activities and outings are undertaken at my risk.
- 4.) I am further aware that the Dunvegan Nursery School, its staff, teachers, governing bodies, supervising adults and organisers accept no responsibility for any loss, injury or damage that the person or property of my child/ren may sustain during any activity or outing - whether or not the said child/ren is on the school premises. Dunvegan Nursery School staff and supervising adults commit to prioritizing the safety and wellbeing of the children in their care at all times.
- 5.) I further indemnify, hold blameless and absolve the school, staff, teachers, governing bodies, supervising adults or organisers of the aforesaid outings and activities from any claim howsoever arising in connection with any injury to the child/ward or loss or damage to any property of the child, in the knowledge that the principal and staff will take all reasonable precautions for the safety and welfare of the child.

Dated at _____ on this _____ day of _____ 20____

Signature of Father/ Guardian _____ Date _____

Signature of Witness _____ Date _____

Full Names _____

Signature of Mother/Guardian _____ Date _____

Signature of Witness _____ Date _____

Full Names _____

DUNVEGAN NURSERY SCHOOL ASSOCIATION

25 Frances Street, Cnr Dunvegan Avenue, Edenvale, 1610 | P.O. Box 305, Dunvegan, 1610.

Telephone: (011) 453-7969 | Email: admin@dunvegannurseryschool.co.za

www.dunvegannurseryschool.co.za



PERMISSION FOR PHOTOGRAPHS TO BE USED

From time to time we have events at school, and we take photographs of the children. You will see that many schools publish photographs of their children involved in various activities in the local press.

Legally, we may not publish photographs of children under the age of 18 years old without the consent of their parents. You can imagine that it is very time consuming to obtain permission each time we use a photograph, and so we would be grateful if you can complete the form below and return it to school.

If you feel that you do not wish your child's photograph to be published, please also complete the form below and we will ensure that your wishes are respected.

Yours sincerely

Cindy Keet
Principal

I, _____ parent/guardian of _____

_____ give permission / do not give permission for

photographs of my child to be published.

Signature of Father/ Guardian _____ Date _____

Signature of Mother/Guardian _____ Date _____

PERSONAL INFORMATION & PARENT'S POPIA CONSENT FORM

I/ We, as parent/s, guardian/s and or the adult/s responsible for the minor children (herein referred to as the "learner/s") who is/ are attending Dunvegan Nursery School (herein referred to as "the School") hereby accept that any personal information that has been or is provided to the School is provided voluntarily and that the School may:

- Generate academic, attendance, behavioural and other school related records relating to the learner/s;
- Send documents and/ or information to the parent regarding the learner via various communication methods including, but not limited to, Class WhatsApp group, SMS, email, by post or hand delivery.
- Store and process the data collected in order to provide services relevant to enrolment and/ or the education of the learner at this School including, but not limited to:
 - o Enrolling the learner/s and providing our services to the learner/s and parent/s, guardian/s during their time at the School;
 - o communicate with parent/s or guardian/s regarding school news, events and general information;
 - o confirm, verify and update personal details;
 - o ensure learner/s are safe, healthy and provided for during their time at our School;
 - o conduct market research or customers satisfaction surveys;
 - o comply with all legal and regulatory requirements.
- Share your personal information with employees, and Executive Committee members, who require it in order to perform their duties and/ or maintain the health and safety of the learner/s. All employees are bound by the School's Data Protection policies and procedures.
- Share your personal information with necessary third parties only in order to enable us to provide our services to you and/ or comply with legislation and statutory requirements. This will include an Attorney appointed by the School in the event of non-payment of fees. We may need to pass on the information provided, when required, as part of school reports, testimonials and confidential reports, and for statistical and research purposes, or when legally required to do so. Where we share personal information, the School will take all reasonable measures to ensure that the relevant third-party will treat your information with the same level of protection as required by us. Your information may be hosted on servers managed by a third-party service provider, which may be located outside of South Africa.
- Disclose the learner/s medical information to medical professionals and School employee/s, should the learner/s sustain injury/ allergic reaction or any other event which requires them to get professional medical attention. The School also has a statutory duty to report all serious incidences in accordance with the COIDA Act.
- Provide parents with the right to access, amend, restrict use of or delete their personal information stored and communicate the process to report any incidents, data breach concerns or complaints.
- Safely destroy all personal information after it is no longer required and/ or relevant, in accordance with statutory retention guidance.

I/ We hereby authorise and consent to Dunvegan Nursery School collecting, processing and sharing my/ our personal information in accordance with the POPI Act and the School's Privacy Policy.

1. This consent specifically includes the right to work with my/our bank account details, as and when required, to ensure that I/we receive payments or refunds due to me/us.
2. This consent is furnished on condition that my/our personal information shall be used and processed only in accordance with the Protection of Personal Information Act.
3. This consent specifically includes the right to collect, process and disclose (only where absolutely necessary for statutory purposes or in order for us to provide our services) the personal information of our learner/s.

Signature: Dated _____
(Parent/ Guardian 1)

Signature: Dated _____

(Parent/ Guardian 2)

*Rest assured, we are committed to safeguarding and processing your information in a lawful and responsible manner. Please review our **Privacy Policy** available on our website. You can contact our Information Officer (Cindy Keet) by emailing admin@dunvegannurseryschool.co.za in order to make a complaint, report an incident or data breach, as well as request to access, amend, erase or restrict use of your Personal Information at any time*