Reg No.2008/010403/08

LOMPEC INDEPENDENT PRIMARY SCHOOL

(LOMPEC EDUCATION CENTRE)
(ASSOCIATION INCORPORATED UNDER SECTION 21)

10935 Ledwaba Street P.O. Rethabile Mamelodi East 0122



P. O. Box 77139 Mamelodi 0101

TEL: (012) 801 - 1015 FAX: (012) 801 - 1015 EMIS No.: 220756 NPO No.: 063-205 e-mail:lompec@icon.co.za website: www.lompeccollege.co.za

<u>APPLICATION AND REGISTRATION 2019</u> (GRADE R - 6)

Your application to study at'the above school will be considered upon submission and verification of the following documents.

You are now required to submit the following:

- 1. Registration fee (Non-refundable)
- 2. Original Progress /Report. (Not a copy)
- 3. Original Transfer Letter. (Not a copy)
- 4. Birth Certificate
- 5. Application form (Attached)
- 6. Both Parents ID / Passport
- 7. Proof of residence
- 8. Immunization cards for Grade R & 1
- 9. Graduation Certificate for Grade 1)
- 10. For Grade R all learner should be 5 years or turning 6 after June 2019
- 11. Study Permit (Foreign Nationals)
- Our first term commences on the (9th January 2019 at 07:30)

Regards

L. Makola

Registrar

APPLICATION FORM

Grade Applied for: [] Highest Grade Passed: [] Year Passed: [] Accession No:[
PERSONAL DETAILS
SURNAME :
ID/ PASSPORT No. :
GENDER: Female [] Male [] RACE: HOME LANGUAGE:
POSTAL ADDRESS:
RESIDENTIAL ADDRESS:
HOME TELEPHONE No.: () CELL No.:
DECEASED PARENT: Mother [] Father [] Both [] MODE OF TRANSPORT [
RELIGION: [] PRE-PRIMARY EDU. None [] Non Formal [] Formal []
PREVIOUS SCHOOL INFORMATION
NAME OF PREVIOUS SCHOOL :
PREVIOUS SCHOOL ADDRESS:
PROVINCE: YEAR:
REFERENCE: TEL No.:
LEARNER MEDICAL INFORMATION
MEDICAL AID NUMBER: MEDICAL AID NAME:
MEDICAL AID MAIN MEMBER: DOCTOR NAME:
DOCTOR'S ADDRESS:
DOCTOR TELEPHONE NUMBER:
Medical Condition:
Special Problems Requiring Counseling:
Dexterity of Learner: Right Handed [] Left Handed [] Ambidextrous []
Reg. Social Grant: Yes [] No [] Rec Social Grand Yes [] No []
Number of other children at this school: [] Position in the family (e.g. first): []

DETAILS OF PARENT/GUARDIAN

TITLE: [] INITIALS [J SURNAME :
FIRST NAMES :	GENDER: Male [] Female: []
HOME LANGUAGE:	
ID/ PASSPORT No.:	
RESIDENTIAL ADDRESS:	
CITY:/SUBURB:	CODE:
OCCUPATION:	EMPLOYER:
SURNAME OF SPOUSE:	FIRST NAME:
OCCUPATION OF SPOUSE:	Learner resides with this parent/s: Y[] N[]
SPOUSE ID No.:	Relationship to Learner:
CORRESPONDEN	CE DETAILS
TITLE: [] NAME:	
POSTAL ADDRESS:	
CITY/SU	UBURB:CODE:
OTHER CONTACT	T DETAILS
Home Telephone: []	Work Telephone: []
Fax Number: []	Cell Number:
Spouse Work Telephone Number: []	/ Spouse Cell Number:
E-mail Address:	Spouse E-mail Address:
I hereby declare that to the best of my kno correct.	owledge, the above information as supplied is accurate and
Name of Parent/ Guardian:	
Signature of Parent/ Guardian:	
Date:/	

FEES FOR GRADE R - 6 LEARNERS

SCHOOL FEES	REGISTRATION (NEW LEARNERS)
Tuition Fee: R 12 100.00 per annum	Registration: R 1 000.00 (Non-refundable)
Monthly Payments: R 1 100.00 x 11 months (February to December)	
TOTAL: R 12 100.00 per annum	

- 1. CASH PAYMENTS: 10% discount to be refunded to parents if fees are fully paid by the parent on or before the 31st January.
- 2. No discount will be refunded if fees are fully paid by the company on or before the 31st January.
- *3. If there are four learners from the same family, a discount will be given as follows:*

1st learner R12 100.00pa or R 1 100.00 per month x11 2nd learner R11 000.00pa or R 1 000.00 per month x11 3rd learner R 9 900.00pa or R 960.00 per month x11 4th learner automatically qualifies for a bursary

Please Note: Only biological children are eligible for the above discount.

SUBJECTS FOR FOUNDATION PHASE- GRADE R	
ENGLISH HOME LANGUAGE	
MATHEMATICS	
LIFE SKILLS	

SUBJECTS FOR FOUNDATION PHASE- GRADE 1-3	
ENGLISH HOME LANGUAGE	
AFRIKAANS FIRST ADDITIONAL LANGUAGE	
MATHEMATICS	
LIFE SKILLS	
ISIZULU SECOND ADDITIONAL LANGUAGE	
SEPEDI SECOND ADDITIONAL LANGUAGE	
INTRODUCTION TO COMPUTER	

SUBJECTS FOR INTERMEDIATE PHASE- GRADE 4 -6	
ENGLISH HOME LANGUAGE	
AFRIKAANS FIRST ADDITIONAL LANGUAGE	
MATHEMATICS	
NATURAL SCIENCE AND TECHNOLOGY	
LIFE SKILLS	
SOCIAL SCIENCES	
COMPUTERS STUDIES	
AFRICAN LANGUAGES	
ISIZULU SECOND ADDITIONAL LANGUAGE	
SEPEDI SECOND ADDITIONAL LANGUAGE	

It is compulsory that this form be COMPLETED AND RETURNED to the school LOMPEC INDEPENDENT PRIMARY SCHOOL

	SCHOOL FEES COMMIT		ID		-4
				ID	
physi	cal address:				
(chos	en domicilium citandi et e	executandi)			
Tel. ((H)	(W)	(Cel	l)	
hereb	by declare tha <u>t I am truly</u>	and lawfully indebt	ed to LOMPEC INDEPE	NDENT PRIMARY SCH	OOL in
the a	mount of R	for sch	ool fees due for 20,	for my child.	
every	ount in words) <u>Twelve Th</u> oy month). eby undertake to make a			thly (on or before the	e 4 th of
<u> </u>	Direct Banking (reques				
		_	tails of payment must I	oe entered on Interne	et/
	Deposit Slip and a copy				
	Debit Order (Make arra	ngements with you	r bank timeously).		
	EFT Payments Services	-			
NB:	Please state NAME OF	LEARNER on depo	sit slips when using dir	ect banking method	l .
	Name of Chi	ild		Grade	
	Fees are payable	over a period of E	LEVEN MONTHS - Febru	uary to December.	
NB: L	earners with 2 months over	erdue accounts will	be barred from attend	ing classes and will b	e placed
in sel	f-supervised study on the	school premises un	til all outstanding fees	are settled in full an	d the
parer	nt/ guardian agrees to the	school absolute di	scretion.		
the p	arent/ guardian agrees th	at any failure to pa	y school fees for three	(3) months or more v	will
const	itute a material breach of	f this agreement an	d the contract will be t	erminated with imm	ediate
effec	t resulting in the learner q	given a letter of tra	insfer.		
this c	contract covers a period of	f one (1(year, com	mencing on the 9 Janua	ary 2019 to 31 Decem	ber 2019
and t	erminate automatically up	oon the expiry date	. The school shall use	its discretion for furt	her
renev	val.				
In the	e event of my failing to pa alance of such capital, int er notice. I agree to the j	terest and legal cos jurisdiction of the <i>I</i>	ts shall immediately be Magistrate's Court. and own client scale,	due and payable wit	thout charges
full b furth I here incur capit	eby consent to pay all corred by the school for rec	overy of any indel			terms o

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INDEMNITY FORM

being Parent / Guardian
accept that all reasonable precautions will taken to ensure the safety and welfare of my child, and that I shall be responsible for e payment of medical and/or other hospital accounts, where applicable, should an injury sustained.
also declare that the school and staff cannot be held liable, and are indemnified against ss of any personal articles of clothing, toys etc, brought to the school, or any personal jury or death howsoever arising.
nereby consent for my child going on an outings during the period that he/she is at this hool, and indemnify the school and staff against any claim that may arise.
he Lompec Management Board reserves the right to amend the rules and gulations where the need arises.
gned this day of 20 at
ther/Guardian: Mother/Guardian
itness 1

UNIFORM (Grade R)

Summer Uniform

Boys : Navy Blue long pants

White Golf T-Shirt / School T-Shirt

Maroon Jersey / Fleece Jackets

School Tracksuit

Black school Shoes and Socks

Girls : Navy Blue long pants

School T-Shirt / White Golf T-Shirt

Navy Blue Skirts

Maroon Jersey / Fleece Jackets

School Tracksuit

Black School Shoes and White Socks

Winter Uniform

Navy Blue Long Pants

Trackshuits (School) R450.00

Maroon Fleeze Jackets

Maroon Jersey

Black School Shoes

Sports Shorts

Uniform should be worn fully from Monday to Friday except on civies day.

UNIFORM (Grade 1 - 6)

GIRLS: NAVY BLUE SKIRTS (PANEL)

NAVY BLUE TROUSERS

WHITE AND BLUE SHIRTS

SCHOOL T-SHIRT

WHITE SOCKS

BLACK SHOES

MAROON JERSEY

MAROON DRI-MAC/FLEECE JACKET

SCHOOL TRACKSUIT

BOY: WHITE AND BLUE SHIRTS

SCHOOL T-SHIRT MAROON JERSEY

BLACK SHOES/BLACK SOCKS

MAROON DRI-MAC/ FLEECE JACKET

NAVY BLUE SHORTS - SUMMER

NAVY BLUE LONG PANTS - WINTER

SCHOOL TRACKSUIT

All learners must be in full uniform from day 1.