Reg No.2008/010115/08

### LOMPEC PRE-SCHOOL AND DAY CARE CENTRE

10935 Ledwaba Street P.O. Rethabile Mamelodi East 0122



P.O Box 77139 Mamelodi 0101

TEL: (012) 801 – 1015 Fax 2 E-mail (086) 429 5336 RefNo.:7/8/2/2/736/6 NPO No.: 063-306

PBO SEC 18<sup>A</sup> No.: 930038919

e-mail:lompec@icon.co.za website: www.lompeccollege.co.za

# APPLICATION AND REGISTRATION 2026 GRADE 00, 0,R

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. Application Form
- 2. Registration Fee (Non-refundable)
- 3. Birth Certificate
- 4. Clinic Card (Immunization Card)
- 5. Both Parent's Certified ID Copy / Passport
- 6. Proof of Residence
- 7. Study Permits (Foreign Nationals)
- 8. Proof of eligibility to pay school fees, e.g Payslip or Bank statement.
- 9. Reference letter stating school fees payment history from former school.
- 10. Reference letter stating learner behaviour
- Our first term commences on the (14th January 2026 at 07:30)

Regards
O . Makhulwane
Registrar

Regarde

# APPLICATION FORMS DAY CARE CENTRE 2025 INFORMATION OF THE CHILD

CHILD INFORMATION
SURNAME:
FIRST NAMES:
DATE OF BIRTH:
GENDER: MALE[] FEMALE[] AGE[]
HOME LANGUAGE:
ALLERGIES:
GENERAL:
DECEASED: MOTHER [] FATHER [] BOTH []
SOCIAL GRANT: YES [] NO []
DECADENTAL A DEDUCC
RESIDENTIAL ADDRESS
RESIDENTIAL ADDRESS:
AREA CODE :
CONTACT NUMBER:
CONTACT PERSON / EMERGENCY NUMBER :
I hereby acknowledge that the above information is to the best of my knowledge and believe true and correct.
I also believe that no monies will be refunded for any reason whatsoever and that all fees shall be paid before the 4th of every month.
NB.: This application form will not be valid without payment of registration fee.
Signature Of Parent Date

## PARENTS INFORMATION

MOTHER'S INI	FORMATION
SURNAME:	
FIRST NAMES :	
ID/ PASSPORT NUMBER :	
MARRIED [ ] SINGLE [ ]	DIVORCED [ ] WIDOW [ ]
RELATIONSHIP WITH CHILD: PARENT [ ]	GUARDIAN [ ] FORSTER CARE [ ]
ADOPTED [ ]	
CONTACT INF	ORMATION
POSTAL ADDRESS :	
	POSTAL
CODE:	
WORK TEL NO. [ ]	HOME TEL NO. [ ]
CELLPHONE NO. :	E-mail :
MEDICAL INF	ORMATION
MEDICAL AID :	
MEDICAL AID NUMBER :	
FAMILY DOCTOR:	
DOCTOR'S CONTACT NUMBER :	
WORK INFO	RMATION
NAME OF COMPANY :	
POSITION/DESIGNATION:	
CONTACT NUMBER : []	CONTACT PERSON :
WORK ADDRESS:	
	AREA CODE:
NUMBER OF YEARS IN COMPANY :	
FATHER'S INF	ORMATION
SURNAME:	
FIRST NAMES :	
ID/ PASSPORT NUMBER :	
	DIVORCED [ ] WIDOW [ ]
	GUARDIAN [ ] FORSTER CARE [ ]
ADOPTED [ ]	ODAKATION
MEDICAL INF	ORMATION
MEDICAL AID:	
MEDICAL AID NUMBER:	
FAMILY DOCTOR:	
DOCTOR'S CONTACT NUMBER:	DMATION
WORK INFO	KWIATION
NAME OF COMPANY:	
POSITION/DESIGNATION:	CONTACT DEDCOM.
CONTACT NUMBER : []	CONTACT PERSON :
WORK ADDRESS:	AREA CORE
NUMBER OF VEARCING COMPANY.	AREA CODE:
NUMBER OF YEARS IN COMPANY :  CONTACT INF	ODMATION
	ORMATION
POSTAL ADDRESS:	
	POSTAL CODE :
WORK TEL NO.: [ ]	
	HOME TEL NO.: [ ]
CELLPHONE NO.:	E-Mail :

1. All children mus	et wear the prescribed ould be paid on or be	l school uniform.	ury month	
<ol> <li>Sick pupils must</li> <li>Unfortunately w</li> </ol>	not attend classes. e are unable to admit	disabled children		
5. We remain open	during all mid-year	school holidays.		

### D A Y C A R E F E E S

**Grade 00 (2 - 3 years)** 

Registration Fee: R500.00

(Non-refundable)

Monthly Fees: R 1 100 - 00 x 11 months

(February to December)

Total Fees: R12 100-00pa

**Grade 0 (4 - 5 years)** 

Registration Fee: R500.00

(Non-refundable)

Monthly Fees: R 1 100 - 00 x 11 months

(February to December)

Total Fees: R12 100- 00pa

Grade R

Registration Fee: R500.00

(Non-refundable)

Monthly Fees: R 1 100 - 00 x 11 months

(February to December)

Total Fees: R12 100- 00pa

- 1. **NB:** *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 Sibling Discount Bursary

Objective: To support families with multiple learners at Lompec Independent Primary and Secondary School by providing a 50% bursary for one child.

#### **Eligibility Criteria:**

- 3.1 The family must have **three (4) or more learners** currently enrolled at Lompec Independent and Secondary School.
- 3.2 A 50% bursary will be awarded to the youngest learner in the family.

NB: THE PARENTS/GUARDIAN OF A BURSARY RECIPIENT IS RESPONSIBLE FOR THE PAYMENT OF REGISTRATION OR READMISSION FEES, STATIONERY AND ADDITIONAL COSTS SUCH AS SCHOOL TRIPS.

### **UNIFORM**

### **Summer Uniform**

Boys : Navy Blue long pants

White Golf T-Shirt / School T-Shirt

Maroon Jersey / Fleece Jackets

School Tracksuit

Girls : Navy Blue short skirt

School T-Shirt / White Golf T-Shirt

Maroon Jersey / Fleece Jackets

School Tracksuit

Summer Uniform T-shirt and Short Winter Uniform Tracksuits

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

# It is compulsory that this form be COMPLETED AND RETURNED to the school LOMPEC DAY CARE SCHOOL

CONFIRMATION OF ADMISSION TO SCHOOL 20.... SCHOOL FEES COMMITMENT I, the undersigned, \_\_\_\_\_ ID \_\_\_\_ of physical address: (chosen domicilium citandi et executandi) Tel. (H) \_\_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_ hereby declare that I am truly and lawfully indebted to LOMPEC DAY CARE SCHOOL in the amount for school fees due for 20....., for my child. (Amount in words) Twelve Thousand  $\underline{One\ Hundred\ R}$  payable monthly (on or before the 4th of every month). I hereby undertake to make all payments to the school as follows: Direct Banking (request banking details in Admin Office). Internet Banking. (Learner's Name and details of payment must be entered on Internet/ Deposit Slip and a copy forwarded to the school). Debit Order (Make arrangements with your bank timeously). EFT Payments Services are available at the school. Please state LEARNER'S REFERENCE NUMBER on deposit slips when using direct banking method. NB: Name of Child Grade Fees are payable over a period of ELEVEN MONTHS - February to December. Learners with 1 month overdue accounts will receive messages and phone calls as reminders. Learners with 2 months overdue accounts will receive a letter of demand within 14 days and a final notice within 10 days. The parent/guardian agrees that any failure to pay school fees for three (3) months or more will constitute a material breach of this agreement and the contract will be terminated with immediate effect resulting in the learner given a letter of transfer and the account will be handed over to debt collectors (TPN). This contract covers a period of one (1) year, commencing on the 14 January 2026 to 31 December 2026 and terminate automatically upon the expiry date. The school shall use its discretion for further renewal. In the event of my failing to pay any instalment payable under this acknowledgement on due date, the full balance of such capital, interest and legal costs shall immediately be due and payable without further notice. I agree to the jurisdiction of the Magistrate's Court. I hereby consent to pay all costs on an attorney and own client scale, (including collection charges) incurred by the school for recovery of any indebtedness to herein. All payments made in terms of capital. SIGNED AT \_\_\_\_\_ ON THE \_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_ AS WITNESSES: SIGNATURE OF PARENT/GUARDIAN

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## **INDEMNITY FORM**

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