



ADMISSION FORM

Date of admission:			Photo of child
Attendance:	Full day 07:00 – 17:30	Half day 07:00 – 12:00	
Application for:	3 mnths – 24 mnths		
	2 – 5 years		
	Aftercare (Grade R – 3)		

SECTION 1: Details of child

PERSONAL INFORMATION OF CHILD	
Name:	
Surname:	
Date of birth:	
Age:	
Gender:	
Home language:	
Denomitation:	
Number of children in family:	
Position of child in family:	
Name and contact number of previous daycare attended:	

MEDICAL INFORMATION OF CHILD	
General health:	
Immunizations up to date?	
Name of doctor / pediatrician:	
Address:	
Contact number:	
Medical Aid:	
Option:	
Medical Aid Membership number:	
Name of main member:	
ID number of main member:	
Any problems before/after birth?	
Has your child had any operations?	
Any medical conditions – heart disease, asthma, etc?	
Any allergies?	
Has your child had any childhood diseases?	
Does your child use any chronic medication?	
Name of medication:	
Use and dose of medication	
Does your child suffer from any social or emotional conditions?	
Is your child potty trained?	
Current sleeping pattern during the day:	

SECTION 2: Personal information of parents/guardians

Family setup:			
Married		Divorced / Separated	Guardians
If divorced/separated with whom does the child reside?			

FATHER	MOTHER
Full name(s):	Full name(s):
Surname:	Surname:
ID number:	ID number:
Cellphone number:	Cellphone number:
Home Address:	Home Address:
Postal Address:	Postal Address:
Contact number (home):	Contact number (home):
Marriage status:	Marriage status:
Career:	Career:
Employer:	Employer:
Contact number (work):	Contact number (work):
Email Address:	Email Address:
Name and surname of spouse, if not the mother of the child:	Name and surname of spouse, if not the father of the child:

Additional contact information of persons, in time of need, if both parents/guardians cannot be reached:

Name:	Name:
Surname:	Surname:
Relation:	Relation:
Cellphone number:	Cellphone number:
Employer:	Employer:
Contact number (work):	Contact number (work):

From time to time Babilu will be taking photos/video clips of the activities in which the children take part. We would like to post this on our Facebook page or our website. Please indicate whether you approve that we may publish your child's photo.

Yes	No
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Please note that the following documentation should accompany the form:

Copies of both parents' ID documents	
Copy of child's birth certificate	
Copy of child's clinic card	
Proof of address (person responsible for the payment of school fees)	
Financial Agreement – signed and attached	
Indemnity Form – signed and attached	
Registration Fee – R300 (3 mnths – 5 yrs) / R120 (Aftercare)	

