111 Springhaas Avenue | Theresapark | 0155
Phone: 063 822 4208
Email: info@brighthouseacademy.co.za
Website: www.brighthouseacademy.co.za

BRIGHT HOUSE ACADEMY
Bright minds for a bright future

APPLICATION FOR ADMISSION

AFTERCARE

GENERAL

Child's Name and Surname	
Child's Age	
Child's Gender	
Child's School	
Child's Grade	

*****CERTIFIED COPIES OF THE LISTED DOCUMENTS ARE VERY IMPORTANT*****
*****NO APPLICATION WILL BE ACCEPTED WITHOUT THESE DOCUMENTATION*****

1.	Certified copy of unabridged Birth Certificate	
3.	Certified copy of ID – Mother	
4.	Certified copy of ID – Father	
5.	Proof of residential address	
6.	Non SA citizen must provide 1. Temporary or permanent Residence Permit from the Department of Home Affairs 2. Certified copies of passports (Parents and Child)	

FOR OFFICE USE ONLY				
Application fee Paid	**Yes**	**No**	Admission Number	
Necessary documents received	**Yes**	**No**	Class Allocation	
Offer Status	**ACCEPTED**	**DECLINED**		

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SECTION 1: CHILD'S PERSONAL DETAILS

Surname											
First Name											
ID Number											
Date of Birth			Current Age								
Gender	Male	Female	Home Language								
Nationality			Country								
Race	Black		White		Indian		Coloured		Other (Specify)		
Special Needs of Learner (If Applicable)											
Medical Aid Name			Medical Aid Number								
Medical Aid Main Member			Dependant Code								
Number of children in family			Position of child in family								
Has the child received all necessary immunisation?			Yes		No						
If No, please state the reason:											
Does your child suffer from any allergies? (Please state which)											
Medical Conditions Of The Learner (If Applicable)											
Doctors Name:			Doctors contact details								
Who does the learner current live with? (Please tick)	Mother		Guardian		Other (Specify)						
	Father		Grandparents								

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SECTION 2: PARENT 1 DETAILS (Responsible for the account)

Surname											
First Name											
ID Number											
Relationship to child					Marital Status						
Designation	Mr	Mrs	Miss	Dr	Prof	Other (Specify)					
Nationality					Country						
Race	Black		White		Indian		Coloured		Other (Specify)		
Occupation											
Employer											
Residential Address						Work Address					
Home Number						Work Number					
Cell Number											
Email Address											

SECTION 3: PARENT 2 DETAILS

Surname												
First Name												
ID Number												
Relationship to child					Marital Status							
Designation	Mr	Mrs	Miss	Dr	Prof	Other (Specify)						
Nationality					Country							
Race	Black		White		Indian		Coloured		Other (Specify)			
Occupation												
Employer												
Residential Address					Work Address							
Home Number					Work Number							
Cell Number												
Email Address												

SECTION 4: EMERGENCY CONTACTS (NOT PARENTS)

Surname			
First Name			
Relationship to child			
Cell Number		Work Number	
Email Address			

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SECTION 5: DECLARATION

I/We (Full Names) _____, the undersigned parent(s)/guardian(s) of _____, do hereby confirm and declare the following certify that the information provided in this Application for Admission form is complete and true. We acknowledge that enrolment is subject to, inter alia, signing a School Contract that contains the detailed terms, conditions, and codes of conduct for Bright House Academy.

We acknowledge that we have read and understood the Fee Structure, and will accept a position at Bright House Academy in accordance with the terms and conditions as stated therein. These documents, as amended from time to time, are available from the School office.

_____	_____	_____
Signature of parent 1 (Responsible for account)	**Relation to child**	**Date**
_____	_____	_____
Signature of parent 2	**Relation to child**	**Date**

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FEE STRUCTUTRE 2026

School Fees - Day-care:

Once Off Fees:

Fee Type	Amount	Frequency
Registration Fees	R 650	Once Off

Monthly Rate Payable January through December

Fee Type	Amount	Frequency
Age 3 – 6 Years	R 2 450	Monthly
Age 3 months – 2 Years, 11 Months	R 2 650	Monthly

School Fees - After-care:

Fee Type	Amount	Frequency
Aftercare Registration	R 400	Once Off
Theresapark; Rachel De Beer	R 1 300	Monthly
Charlton Vos; Akasia	R 1 350	Monthly
Voortrekker ; Assumption	R 1 400	Monthly

1. **School Fees are paid in advance and are due by the 3rd of each month.**
2. **Payment are for 12 monthly instalments of R2 450 for age groups 3 – 6 and R2 650 for age groups 3 months to 2 years and 11 months.**
3. **A registration fee is to be paid upon acceptance to Bright House Academy and is a once off fee.**
4. **No cash will be accepted on premises. All payments are to be EFT/ electronic or debit order. A debit order facility is also available to parents who wish to make use of the facility.**
5. **The Nursery School reserves the right, at their own discretion, to instruct parents to remove children for non-payment of fees or if the school deems it necessary for a child to be removed (after dialogue with the parents)**
6. **No deductions can be made if a child is absent as a result of illness, holidays or any other reason.**
7. **Failure to collect children at the appropriate time (18h00 p.m.) will result in a R60.00 charge for every 5 minutes or part thereof, which the parents undertake to pay on receipt of a letter to this effect from the school.**
8. **ONE CALENDAR MONTH'S NOTICE IN WRITING is required before a child is taken out of the Nursery School OR pay one month's fees in lieu of notice.**

School Fees Declaration

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I/We, _____parent(s)/guardian(s) of

_____ commit to pay the monthly school fees to Bright House Academy. These fees are paid IN ADVANCE on or before the last working day of each month.

These fees are paid on a

- **12-month system January – December (inclusive) for all children**
- **Fees are paid through EFT/Electronic or Debit Order.**

Bank: First National Bank
Account Holder: Bright House Academy
Account Type: Current Account
Account Number: 6291 4168 366
Branch Code: 250655
Reference: Child's Name and Surname

_____	_____	_____
Signature of parent 1	**Relation to child**	**Date**
(Responsible for account)		

_____	_____	_____
Signature of parent 2	**Relation to child**	**Date**

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MEDICAL CONSENT

In a critical medical situation, please bear in mind that there may not be time to refer to the child's records. The school therefore, reserves the right to utilise the quickest medical service available.

I/We, _____, being the

parent(s)/legal guardian(s) of _____ hereby agree that a medical practitioner may provide emergency medical treatment as is necessary. I also understand and agree that any costs involved will be my responsibility.

Signature of parent/legal guardian: _____

Date _____

CONSENT FORM IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT 4 OF 2013 (POPI)

Consent to use personal information

- By agreeing to the terms of this information form, you, (PARENT / GUARDIAN), hereby voluntarily authorise Bright House Academy to process your personal information as well as that of the learner (Child enrolled at Bright House Academy), (including the names, physical address, telephone numbers and any other information you have provided to the crèche).

- Processing shall include the receipt, recording, organising, collation, storage, updating or modification, retrieval, alteration, consultation and use; the dissemination by means of transmission, distribution or making available in any other form, or the merging, linking as well as blocking, degradation, erasure or destruction of information.

- This consent is effective immediately and will remain effective until otherwise indicated by the person consenting to have the consent revoked.

- The personal information may only be processed if it is adequate, relevant and not excessive, given the purpose for which it is processed, and if processing occurs in accordance with the relevant provisions of POPI. The purpose of the processing of information must relate to a function or an activity of the crèche.

- In addition, you hereby take note that Bright House Academy collects and processes personal information pertaining to the proper functioning, management and governance of the crèche, as prescribed in the relevant education legislation and policies.

- The type of information will depend on the purpose for which it is collected, and will be processed for that purpose only.

- In terms of section 11 of POPI, personal information may only be processed in the following circumstances:
    - If the data subject, or a competent person where the data subject is a child, consents to the processing.
    - If processing is necessary to carry out actions for the conclusion or performance of a contract to which the data subject is party.
    - If processing complies with an obligation imposed by law on the crèche.
    - If processing protects a legitimate interest of the data subject.
    - If processing is necessary for the performance of a public law duty.
    - If processing is necessary for pursuing the legitimate interests of the school.

Your rights in terms of this consent

You have the following rights:

- The right to know what information is being kept, how it is being used, and when the crèche will disclose it. All of the aforesaid information is contained in our Policy on the Protection of Personal Information and our Privacy Policy, which are available and may be obtained from our offices.

- The right to correct your details. The school will try to keep your information up to date. However, should any of your details change, please notify us to ensure that our records are as accurate as possible.

- The right to revoke consent. You may revoke the consent you have given us in terms of this form at any time. Your revocation should be in writing and addressed to the crèche office. Revoked consent is not retroactive and will not affect any past or existing use of your information

Consent to receive marketing information

- By agreeing to the terms of this consent form, you expressly consent to the processing of your information for marketing purposes. You understand that by consenting, you may receive marketing materials, relevant to Bright House Academy, in the form of SMS's, WhatsApp's, emails etc. from the crèche and or parent-teacher associations.

Permission to make personal information available on broadcast platforms

- By agreeing to the terms of this information form, you, expressly consent to your personal information, including in the form of video recordings for a programme related to the crèche, as well as any participation in any event at Bright House Academy to be broadcasted on platforms including the Internet, or Apps.

- **Please tick the appropriate box below:**

  I agree ☐ I do not agree ☐

  Details of child (Name and Surname): _____

  Details of parent/guardian (Name and Surname): _____

  Address: _____

  City: _____ **Postal code:** _____

  Telephone number: _____

  Signature of parent/guardian: _____

  Date: _____