



# Norscot Playschool

**Norscot Manor Recreation Centre,  
16b. Penguin drive  
[www.norscotplayschool.co.za](http://www.norscotplayschool.co.za)  
[info@norscotplayschool.co.za](mailto:info@norscotplayschool.co.za)  
083 244 2838 (T) 011 4672799**

## **FULL DAY & HALF DAY CARE PROVIDED**

**Breakfast  
Mid-morning snack  
Lunch  
Mid-afternoon snack**

**Open Monday to Friday  
06h00 to 18h00**

Dear Parent/s,

I would like to take this opportunity to welcome you and your child/children to Norscot Playschool. With your encouragement and support I am looking forward to a fruitful year. Children are our most precious possessions in life and their well being is my top priority. I would like to assure you of the best service at all times.

The objective of Norscot Playschool is to provide a secure and happy environment in which to give the most up-to-date Pre-School training to your child. There is much to learn before going to Primary School, many skills to develop and concepts to grasp and these precious pre-primary years should not be wasted. Norscot Playschool would like to ensure that your child will cope with Primary School and help put your child on the path to a great future.

As language is vital within our society, I place great importance on encouraging the children in every aspect of LANGUAGE DEVELOPMENT – speech, vocabulary, reading and writing. I hope that they can always find someone who will listen to what they want to say.

Please ensure that you read and initial all of the following pages, as well as signing where indicated.

Thank you,

**Greta-Ann S Mair**

**Principal/Owner**

**For and On Behalf of Norscot Playschool**



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P.O. Box 651993, Benmore, 2010  
083 244 2838 (T)**

## ENROLMENT FORM

PERSONAL INFORMATION:
Full name of child:
Boy / Girl:
Date of Birth:
Home telephone number:
Home Address:
Postal Address:
Date of enrolment:

**PLEASE NOTE** that the personal information listed above and below may change from time to time. In the interests of your child's safety we request that in such circumstances you, the parent and guardian of your child, keep the school informed of such changes.

Name and telephone number of person responsible for collecting the child from school:

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In the case of divorced parents, written consent must be given by the child's legal guardian for the former spouse to collect the child. I, (name of legal guardian of child enrolling)  
\_\_\_\_\_, do hereby grant consent for my child/children to be collected by \_\_\_\_\_, and undertake to keep the school informed should I withdraw this consent at any time.

If you deviate from this at any time you must please telephone the school to let us know of the alternative arrangements being made. We will not allow any child to go home with anyone without prior consent from the parent/legal guardian. The school closes at 18h00. In the unlikely event that you are delayed and are not able to collect your child by such time, you are to contact a relative or friend to collect your child/children. Please ensure that you have a backup system in place.

I, \_\_\_\_\_, in the capacity as parent/guardian of my child have read the above and do hereby agree that it is in the interest of my child that I abide by what has been stated herein.

Signed \_\_\_\_\_ at \_\_\_\_\_ on \_\_\_\_\_



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<b>MOTHER'S DETAILS</b>		Full Name:	
Identity Number:		Marital Status:	
Occupation:		Company Name:	
Company Address:			
Work Phone Number:		Home Phone Number:	
E-mail:		Cellular Number:	
Home Address:			
Postal Address:			
Banking details: Bank:		Branch:	Acc no:
<b>FATHER'S DETAILS</b>		Full Name:	
Identity Number:		Marital Status:	
Occupation:		Company Name:	
Company Address:			
Work Phone Number:		Home Phone Number:	
E-mail:		Cellular Number:	
Home Address:			
Postal Address:			
Banking details: Bank:		Branch:	Acc no:

In the case of a medical emergency arising at the school, or should an emergency from your perspective arise causing you to be late in collecting your child; the following relatives/friends will be contacted:-

Name of relative/friend:	Telephone Number:
Name of relative/friend:	Telephone Number:

**In the case of an emergency, Norscot Playschool will use either Dr \_\_\_\_\_ or the Olivedale Clinic.**

<b>MEDICAL INFORMATION</b>	
Doctor's Name:	Doctor's Telephone Number:
Dentist's Name:	Dentist's Telephone Number:
Medical Aid Name:	Medical Aid Membership Number:
Special Instructions:	
Allergies:	
Treatment Required:	

I hereby acknowledge that the onus is on me, \_\_\_\_\_ the parent/guardian of my child, to keep the school informed of any changes regarding the details listed above.

Parent/Guardian Signature: \_\_\_\_\_



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We will stay open until the 15th of December and reopen on the 10th of January. Children/students are provided with breakfast, lunch, mid-morning and mid-afternoon refreshments, as per our menu. It is required that each scholar brings to school with them every day, a suitable sized bag in which to stow items such as jerseys, shoes, fruit and a yogurt.

<b><u>MONTHLY FEES SCHEDULE</u></b>	
Deposit payable upon enrolment ( <i>Refundable</i> )	ONE MONTHS FEES
Non-refundable registration fee per child	R 900.00
Full Day Care per child	R 3,700.00 per month
Half Day Care per child	R 3,300.00 per month
After Primary School Care per child	R 2,200.00 per month

## **Alternatively -**

<b><u>ANNUAL FEES SCHEDULE</u></b>	
Non-refundable annual deposit per child	R 900.00
Full Day Care per child	R 44,000.00
Half Day Care per child	R 39,600.00
After Primary School Care per child	R 27,000.00

## **Methods of Payment -**

For your convenience you may furnish us with post dated cheques, from date of enrolment until the end of the year. Alternatively you may use online banking, but a copy of the proof of transfer is to be handed in to the office timeously. **All fees to are be paid by the last day of the month. (30/31) in advance. Late payment penalties will be added.**

**I take no pleasure in having to constantly remind parents of their obligations and like to run the business on a personal level whereby good relations between us are essential, I therefore request that you submit your payments promptly.**

<b>Banking Details:-</b>	
<b>Account Name:</b>	<b>Norscot Playschool</b>
<b>Bank:</b>	<b>Standard Bank</b>
<b>Branch:</b>	<b>Fourways crossing</b>
<b>Account Number:</b>	<b>023324244</b>



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## OUR SCHOOL MENU

Your growing child requires nutritious and wholesome meals, which we prepare with care so as to help them build up their immunities and to grow up healthy and strong. The formation of good eating habits is encouraged from an early age, which will pay out numerous dividends later in life. All food is prepared with the freshest ingredients available and only on the day it is served. Sandwiches are prepared on brown bread with butter and a filling. Rooibos tea is used with fresh milk and minimal sugar. All juices are tartrazine free. The menu is designed to be suitable for the changing nutritional needs of the children with seasonal changes taken into consideration.

## REQUIREMENTS (in addition to fees)

### Per Term/Quarter

4 Boxes of Tissues (any brand)  
8 Rolls of Toilet Paper (any brand)  
6 Wet Wipe Refills

Alternatively an additional payment upfront of R350 per child, per term

### Per Year

#### 2 – 4 year old children

1 packet of coloured gum paper (CNA)  
1 Lever arch file  
1 box of fat wax crayons  
1 bottle of Ponal Glue  
1 Puzzle 12 – 24 pc  
1 Play dough  
1 Pencil case  
1 ream copy paper  
1 Sunscreen

#### 4 – 6 year old children

1 lever arch file  
1 Pencil case  
2 H.B. Pencils  
1 box **retractable** coloured crayons  
1 Stick of glue (Pritt)  
1 ream copy paper  
1 Homework book  
1 x Puzzle 35 – 100 pc  
1 Sunscreen  
1 packet of coloured gummed paper  
1 Booklet of tracing paper



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## **CONDITIONS OF ENROLMENT**

1. Norscot Playschool undertakes to care for your child during the hours set out on the enrolment form (06h00 to 18h00). Should it occur that you find yourself in a position wherein you are unable to collect your child by 18h00 you are to contact a relative/friend as per the enrolment form and arrange for them to collect your child. Under no circumstances will the staff of Norscot Playschool be held accountable after 18h00. Our contract will be terminated with immediate effect should parents abuse our closing time.
2. Fees are subject to an annual increase, in January of each year, and are payable in full or over 12 months irrespective of parents leave, public holidays or sickness.
3. Norscot Playschool may increase the fees reflected on the enrolment form for any particular period, provided that it shall give notice of such an increase in fees to the parent, no later than seven days before commencement of the period in question on the monthly statement.
4. All fees are payable in advance monthly.
5. Notice or refund, to cancel the agreement and to require the child to leave Norscot Playschool forthwith is in the sole opinion of the principal/owner of Norscot Playschool if this becomes necessary.
6. Notwithstanding the provision of paragraph five above, the parent/guardian may terminate the child's enrolment at Norscot Playschool on giving **three** calendar month's notice to the effect in writing but shall still be liable for the full month's fees as we are still prepared to offer that service.
7. Notice to avoid paying December fees will not be considered. Final notice for the **year** will be **September** of that year.
8. If it becomes necessary for Norscot Playschool to institute any legal proceedings to recover any fees owing to it by the parent/guardian, all costs incurred by such action will be the attorney scale.
9. Neither Norscot Playschool nor any of its employees, servants, or agents shall in any manner be responsible for any loss or injury whatsoever. Except for Gross negligence of any of the employees.
10. All garments (including underclothing, socks and shoes) must be **clearly marked**. Norscot Playschool will not be held responsible for any lost items.
11. A change of clothing is to be put into the child's school bag daily. One extra change of clothing is required for all children as well as a tube of sun block and a sunhat for summer. Toddlers who are still toilet training must bring five pairs of training pants daily and three changes of clothing. Parents are to see that their children are dressed practically and appropriately in clothing that the child can easily remove and replace at will, so as to encourage independence. Each child is to bring a bag to school in which to put his/her belongings.
12. There is a rest time between 12h00 and 14h00 wherein children lie down on a mattress covered by a blanket brought from home. The blanket is to be taken home each Friday to

- be washed and returned to school on the following Monday. Please ensure the blanket is clearly marked with the child's name.
13. Transport children that attend the school on a Half Day basis, will leave at 12pm to their destinations.
  14. All gates and doors are to be closed behind you upon entering and leaving the premises.
  15. Parents may visit the school at any time but are requested not to interrupt the day's schedule.
  16. In event that a parent/guardian is late there will be a 'late charge' of R5.00 for every minute, which the parent/guardian will have to sign for upon collection of the child. This 'late charge' will be added on to the school fees.
  17. The school reserves the right to decide whether a child may or may not attend school for health reasons. According to City Health Regulations, a sick child may not remain at the school and has to be isolated at home, or at another suitable venue.
  18. I hereby agree to a credit check and monitoring of payments by TPN Credit Bureau in accordance with the National Credit act.

- **The school must be notified of any cases of infectious diseases immediately. Furthermore, no child is to be brought to school suffering from a temperature, a bad cough, vomiting, any infections, diahorea, head lice, etc.**
- **NB - In the case of a child returning to school after an infectious illness, a medical certificate clearing the child of the contagion will be required.**

I/We, the undersigned (insert full Names) \_\_\_\_\_

parents/guardians of (insert full name of child) \_\_\_\_\_,

residing at (insert full physical address)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do hereby:

1. Acknowledge that I/we have read, understood and intend to abide by the conditions of enrolment as set out above, and furthermore acknowledge that no amendments or alterations of any kind may be made to this form and that should amendments of any kind be made to any of the stipulations herein, the contract is void.
2. Agree to accept and abide by all terms and conditions governing Norscot Playschool with which I/we declare myself/ourselves to be fully acquainted.
3. Give consent to the person in charge of Norscot Playschool, or in their absence, any other responsible person connected with Norscot Playschool at any given time, to take further steps that are necessary, in the event of injury or illness of the child and thereby pledge my credit.
4. Give consent to the person in charge of Norscot Playschool, or in their absence, any other responsible person connected with Norscot Playschool at any given time, to give the required permission and sign the necessary written consent for the child to be subjected to surgery or any other medical treatment if all attempts to locate either parent or guardian fail, provided that this will be executed on the advice, and under the supervision of the family doctor, or if he/she is not available, under the supervision and advise of a medical doctor as selected by Norscot Playschool.

5. Agree that while the person in charge of Norscot Playschool will care for the child to the best of their ability, and while reasonable precautions for the safety and welfare of the child will be taken, neither they or any persons connected to Norscot Playschool will accept any liability for any claims arising from any accident or injury happening to them/us or the child while he/she is in the care of the supervisor, and to wave and abandon any claims, which may at any time arise as aforesaid, both in my/our personal capacity, and in my/our capacity of the parent or a legal guardian of the child, and I/we expressly indemnify the supervisor or such person against any such claim which may arise or be instituted.
6. Ensure that the child has been properly immunised against whooping cough, diphtheria, tetanus and polio and vaccinated against tuberculoses and will furnish proof of this upon request.
7. Confirm and hereby indemnify Norscot Playschool and all it's employees and representatives and hold them free and harmless in respect of any damages and/or prejudice that I/we or the child may suffer as the result of illness or injury to my/our child, whilst under the control or care of Norscot Playschool or where Norscot Playschool is liable or responsible for such child.
8. Agree and confirm that my consent given herein, shall be deemed to be irrevocable unless and until withdrawn by me/us in writing, and delivery by hand to the principal/owner of Norscot Playschool personally, and signed for. Furthermore, the terms contained in the whole of this document shall not be capable of being amended or cancelled my mutual consent unless reduced to writing and signed by myself/ourselves and the principal/owner of Norscot Playschool.

Unless this consent is completed and signed by the parent/guardian, the child will not be allowed to attend Norscot Playschool.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (place of signing)

\_\_\_\_\_  
SIGNATURE OF MOTHER/GUARDIAN

\_\_\_\_\_  
PRINT FULL NAME

\_\_\_\_\_  
SIGNATURE OF FATHER/GUARDIAN

\_\_\_\_\_  
PRINT FULL NAME

**AS WITNESSES**

1. \_\_\_\_\_

2. \_\_\_\_\_





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## INDEMNITY FORM

I/we (insert full names) \_\_\_\_\_

give full permission for my/our child (insert full name of child),

\_\_\_\_\_

to go on all school outings, by foot in the form of wheeled transport, during the period that he/she attends "Norscot Playschool".

Signed on this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (place of signing)

\_\_\_\_\_  
SIGNATURE OF MOTHER/GUARDIAN

\_\_\_\_\_  
PRINT FULL NAME

\_\_\_\_\_  
SIGNATURE OF FATHER/GUARDIAN

\_\_\_\_\_  
PRINT FULL NAME