



NORTHWEST CHRISTIAN SCHOOL

SCHOOL AND AFTERCARE FEE STRUCTURE FOR 2018

APPLICATION FEE (Payable on application - Non Refundable)	R2 000.00
ACCEPTANCE FEE (Payable on acceptance - Non Refundable)	R1 000.00

Should a sibling be in the school at the time of the second or third application, the Application Fee will be waived, if the child is accepted. Only an Acceptance Fee will be required. For new families joining our school, Acceptance Fees will be charged per child, but only the Application Fee will be charged per family.
(Application and Acceptance fees are not offset against the school fees).

<u>SCHOOL FEES</u>	<u>Per Annum</u>	<u>Per Month</u>
Reception: (Grade R)	R 36 700.00	R 3 670.00
Foundation Phase: (Grade 1 - 3)	R 45 690.00	R 4 569.00
Senior Phase: (Grade 4 - 7)	R 52 145.00	R 5 214.50

AFTERCARE FEES: (excluding Holiday Care)

Full day (until 5pm)	R 11 957.00	R1 196.00
Half day (until 3pm)	R 6 456.00	R 646.00

The daily rate for Casual aftercare will be R110.00 (full day) or R80.00 (half day)

SCHOOL FEES AND AFTERCARE FEES - PAYMENT OPTIONS AND DISCOUNTS ALLOWED

<u>PAYMENT OPTIONS</u>	<u>DATE</u>	<u>% DISCOUNT</u>
Annual Upfront – 1 Child	1 November 2017 - 31 January 2018	10 % Discount
Annual Upfront - Siblings	1 November 2017 - 31 January 2018	15% Discount
Annual Upfront – 1 Child	28 February 2018	8% Discount
Annual Upfront - Siblings	28 February 2018	13% Discount
Monthly Fees – 1 Child	Monthly (January – October)	NO DISCOUNT
Monthly Fees - Siblings	Monthly (January – October)	10% Discount

Annual fees are payable by EFT, Debit or Credit Cards

Monthly fees are payable by EFT, Debit or Credit Cards or by DEBIT ORDER

OTHER CONDITIONS:

- Stationery, school books, text books, and other miscellaneous costs are not included in school fees.
- No reduction in fees will be granted in respect of learners who are absent from school for any reason.
- NWCS requires **thirty days** notice, in writing, if a learner is to be withdrawn from the school. The full fees will be charged in respect of the month for which this notice has not been given.
- In the event of a pupil/s leaving the school during the course of the year and an upfront payment was made, the school will refund the pro-rata months remaining.
- NWCS's policy states that no learner may go on the scheduled school tours for Grades 4 to 7 if school fees are not up to date. The school does, however, organise a one day outing at the school's cost for learners remaining behind.
- No learner will be accepted if there are fees in arrears at other schools or if a sibling's fees are in arrears at NWCS.

Dear Parents

APPLICATION FOR ADMISSION TO NWCS

Thank you for your interest in our school.

Should you wish to enrol your child into our school, please note the following:

An Admission Form must be completed and handed into the office, together with:

- ❖ A copy of your child's birth certificate
- ❖ A passport size photograph of the child
- ❖ A copy of both parents I.D.'s
- ❖ Child's latest school report (if applicable)
- ❖ Any Assessments or Psychological Reports etc. (if applicable)
- ❖ A non-refundable application fee of R1000 (Siblings are exempt)

Please be aware that a credit check with the previous/present school, will form part of the application process and should there be outstanding school fees, admission will not be considered.

We will advise you as soon as possible if your child has been accepted, whereupon an Acceptance Fee of R1000 (non refundable) will be due and payable.

Banking Details:

Bank : Nedbank Cresta
Branch Code: 191305
Account No: 1913199088

For further information about our school, you are invited to browse our website on www.nwcs.co.za.

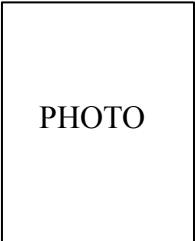
Yours faithfully

BASTIAEN NOREL
PRINCIPAL



NORTHWEST CHRISTIAN SCHOOL

APPLICATION FOR ADMISSION OF A LEARNER



For Office Use:

<i>Family Number</i>	<i>Admission No</i>	<i>Admission Date</i>

PARENTS' DETAILS		
DETAILS	FATHER	MOTHER
Surname		
First Names		
Identity/ Passport No.		
Country of Birth		
Telephone No. Home		
Fax No. Home		
Cell Phone No.		
E-Mail Address (where you would like your correspondence sent to)		
Occupation		
Company Name		
Marital Status		
Ethnic Group		
Telephone No. Work		
Fax No. Work		

RESIDENTIAL ADDRESS OF MOTHER

Name and Number of townhouse / flats (If Applicable)

Street Name and No:

City:

Suburb:

Code:

RESIDENTIAL ADDRESS OF FATHER

Name and Number of townhouse / flats (If Applicable)

Street Name and No:

City:

Suburb:

P POSTAL

Suburb:

Code:

Box/Street:

Code:

Suburb

Do you have other children in the school?

Are you enrolling other children now?

Yes / No. If Yes, please complete -

Name of sibling

Grade:

Name of sibling

Grade:

CHILD'S DETAILS

Grade and year applying for	Grade: _____ Year: _____																				
Surname																					
First Name																					
Other Names																					
Known As																					
Male or Female																					
Ethnic Group (For Government Annual Survey Purposes only)																					
Home Language																					
Country of Birth																					
Immigrant	Yes No																				
Date of Birth																					
Identity Number	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td> </tr> </table>																				
Are there any severe allergies and medication taken that the school should be aware of?																					
Doctor's Name:																					
Doctor's Tel No:																					
Emergency Contacts : Other Than Parents:	Name: _____ Tel: _____ Cell: _____																				
Emergency Contacts : Other Than Parents:	Name: _____ Tel: _____ Cell: _____																				
How many children in family? Position of this child e.g. 1, 2, 3																					
Previous/ Current School or Nursery School																					
Telephone No. of current school																					
Email / Fax no. of current school																					

Religion - Denomination and Church Affiliation	
Do you have any contacts, skills, talents etc. that you (the parents) can contribute to our school? If so please state	
Name of Medical Aid:	
Medical Aid Telephone Number:	
Medical Aid Number :	
Main Member:	



AGREEMENT IN RESPECT OF SCHOOL FEES & AFTERCARE FEES

In order to ensure the successful annual enrolment of your child, please ensure that this Agreement is completed, signed by both parents and returned to the school.

I/We the undersigned

(Full name of Father/Guardian)

(Full Residential Address of Father/Guardian)

and

(Full name of Mother/Guardian)

(Full Residential Address of Mother/Guardian)

do hereby agree to pay Northwest Christian School the annual school fees (and aftercare-if applicable), in respect of each and every year that the following pupil is enrolled at Northwest Christian School.

(Full names of pupil)

Person responsible for payment of School Fees: Mother Father

Person responsible for payment of Aftercare Fees: Mother Father

I/We choose as my/our domicillium citandi et executandi for all purposes arising from this Agreement, the above residential address. I/We hereby undertake to notify the school in writing of any change regarding the name or address, failing which I/We undertake to pay all tracing charges incurred by Northwest Christian School or its Attorneys.

Northwest Christian School requires a full month's notice if a pupil is to withdraw from the school. The full school fees will be charged in respect of the month for which the notice has not been given.

I/We undertake to pay all costs disbursed by the Governing Council of Northwest Christian School to its Attorneys in securing my/our compliance with the provisions of the Agreement on the Attorney and Client scale which shall include tracing fees and collection commission, whether action has been instituted or not.

I/We confirm that payment of school fees will be made as indicated on Annexure A of this Agreement.

No additions and alterations, variations or consensual cancellation hereof shall be of any effect unless reduced to writing and signed by me/us and on behalf of the Governing Council of Northwest Christian School.

I/We fully understand that in the event of any school fees not being paid timeously the school shall be entitled to terminate my child/children's enrolment and the further attendance of my child/children at the school with immediate effect. In such event I undertake to remove my child/children from the school forthwith upon notification of such termination by the school.

This done and signed at _____ on _____

MOTHER

FATHER

ON BEHALF OF THE GOVERNING
COUNCIL OF
NORTHWEST CHRISTIAN SCHOOL



PUPIL INDEMNITY

We,

_____ (Full names of both parents / legal guardians)

of _____

(Full residential address of both parents / legal guardians)

being the parent/legal guardian of

(Full name of learner)

hereby give consent for my son/daughter to take part in any extra-mural activities of the school, including educational excursions of interest, as well as the use of educational and play equipment at the school.

We fully understand and accept that all excursions and school activities shall be undertaken at my son/ daughter's own risk and we undertake on behalf of myself, my executors and my child aforesaid to indemnify, hold blameless and absolve the Northwest Christian School, the Principal and/or staff, paid/unpaid, temporary assistants, against and from any or all claims whatsoever that may arise in connection with any loss of or damage to the property of, or injury, accident or any other cause to the person of my child aforesaid in the course of any such excursions or school activity, in the knowledge that the Principal and staff will nevertheless take all reasonable precautions for the safety of our child.

We hereby authorise the Northwest Christian School to take all steps that it, in its absolute discretion, may deem necessary, to have the aforesaid child admitted to hospital and/or treated by a doctor or other medical attendant.

This done and signed at _____ on _____

SIGNATURE OF FATHER

SIGNATURE OF MOTHER



NORTHWEST CHRISTIAN SCHOOL

CODES OF CONDUCT **PARENTS AND SUPPORTERS**

The aim of school sport is to encourage, excellence, participation, learning, team spirit, exercise, sportsmanship, self-discipline, control, social interaction, ambition and, most importantly, fun.

Parents and supporters need to promote these ideals.

Therefore we would appreciate it if parents and supporters would act in the following manner at sporting events, matches and practices:

- Support children in a positive manner
- No abuse towards Referees, any other officials, coaches, players or opposition supporters.
- Respect the decisions of the umpires/ officials and teach the children to do the same.
- Please remain on the pavilion/stands during sporting activities.
- Respect the Coach's team selection.
- Encourage and congratulate children, irrespective of the results. They want you to be proud of them.
- Respect the rights, values and cultures of all sports, both boys and girls.
- Parents and supporters should take up any concerns, advice or comments with the Sports Co-ordinator or/and Coach.
- If selected for a sporting event/match, it is vital that the child arrives and arrives on time.
- Any child that is absent from school on the day of the event/match, won't be eligible to take part.

We would respectfully request that all Parents, spectators and supporters ensure that this Code of Conduct is adhered to so as to make sport enjoyable for all.

Childs Name: _____

Parents Name: _____

Parents Signature: _____

Date Signed: _____



NORTHWEST CHRISTIAN SCHOOL

FAITH POLICY

Dear Parents

Kindly acknowledge below that you understand that Northwest Christian School is by its Constitution fundamentally Christian. This means that all children are expected to attend and participate in Bible Education classes, Assemblies, Praise Time and Christian Celebrations.

The Christian ethos and environment permeates all parts of the school.

The school's Statement of Faith is also attached for your information.

Yours faithfully

NORTHWEST CHRISTIAN SCHOOL
SCHOOL COUNCIL

I /We acknowledge that we have read and understand the statement concerning Christian Education and Policy on attendance of classes.

Father's signature

Date

Mother's signature

Date



NORTHWEST CHRISTIAN SCHOOL **STATEMENT OF FAITH**

1. We believe that the Bible is the Inspired Word of God, and accept it as our final authority in all matters of Faith and Conduct (2 Timothy 3:16)
2. We believe in one God (Deuteronomy 6:4) eternally existing in three persons: Father, Son and Holy Spirit. (John 16:7 & 17:1)
3. We believe that God created man in His own image (Genesis 1:27); that man sinned and thereby incurred the death penalty (Romans 6:23) physical and spiritual. Further, that all men inherit a sinful nature which is expressed in actual transgression, causing personal guilt (Romans 3:23).
4. We believe that Jesus Christ was begotten by the Holy Spirit (Luke 1:35), born of the Virgin Mary, and is true God (John 14:9) and true Man (Luke 2:52). That on earth He died for our sins, a substitutionary sacrifice, and that all who believe personally in Him are justified on the grounds of accepting His sacrifice (1 Peter 3:18 & John 3:16).
5. We believe in the Person of the Holy Spirit Who lives and works within the life of the believer (John 16:13).
6. We believe that the Lord rose from the dead (Romans 14:9), ascended into Heaven, and that He lives at present with the Father (Acts 1:3), acting as our High Priest and Advocate (Hebrews 9:11 and 1 John 2:1).
7. We believe in the Personal and Imminent return of the Lord (1Thessalonians 4:16).
8. We believe in the resurrection both of the believer and of the unbeliever (Revelation 22:5) and the eternal damnation (Revelation 20:14 & 15) of those who reject God's free offer of salvation (Mark 16:16).
9. We believe that the one true Church is the whole company of those who have accepted Jesus as personal Saviour, and that our Local Church should be an honest expression of the Church Spiritual, making personal salvation essential to Church Membership. (Acts 2:47)
10. We believe that the Church is the Body of Christ, with Christ its only Head (Ephesians 1:23) and that each member forms an integral part in that Body (1 Corinthians 12:12) so that each member is called upon to unite with every other member in a life of Holiness (1 Peter 2:5) and Devotion (Phillipians 1:5). It is the duty and privilege of each member to discover and develop his Spiritual gift (2 Timothy 1:6), to use it to the building up of the whole Body (Ephesians 4:12) and to bear each other's burdens in the spirit of true Christian love. (Galatians 6:2)
11. We believe that the Lord appointed two ordinances; Baptism (Matthew 28:19) and the Lord's Supper (1 Corinthians 11:23-26); to be observed as acts of obedience and as perpetual witnesses to the central facts of the Christian Faith.



NORTHWEST CHRISTIAN SCHOOL

AFTER SCHOOL CARE CENTRE

APPLICATION FORM

Print clearly please

PLEASE INDICATE TYPE OF AFTERCARE BY TICKING THE APPROPRIATE PLACE:

PERMANENT FULL DAY	(13:00 - 17:30)	_____	R1 195.70 x 10 MONTHS
PERMANENT HALF DAY	(13:00 - 15:00)	_____	R646 x 10 MONTHS Grace is given until 15h30
CASUAL FULL DAY	(13:00 - 17:30)	_____	R110 PER DAY
CASUAL HALF DAY	(13:00 - 15:00)	_____	R80 PER DAY Grace is given until 15h30

Aftercare requires 30 days notice, in writing (e-mail) if a learner is to be withdrawn from Aftercare.

Prices are subject to change annually

STARTING DATE _____ CHILD'S DATE OF BIRTH: _____
CHILD'S FIRST NAME: _____ SURNAME: _____
GRADE: _____ TEACHER: _____
NAME OF PARENT/GUARDIAN: _____
CHILD'S PHYSICAL ADDRESS: _____

HOME PHONE: _____ WORK PLACE: _____
CELLPHONE (FATHER): _____ (MOTHER): _____
ALTERNATE CONTACT PERSON: **(OTHER THAN PARENTS)**
NAME: _____ PHONE: _____

ALLERGIES

BEE STINGS: NO ___ YES ___ EPIPEN NEEDED? NO ___ YES ___ IF YES, PLEASE SUPPLY EPIPEN.
ANY OTHER: _____

MEDICAL CONDITIONS AFTERCARE SHOULD BE AWARE OF:

INDEMNITY FORM

I, _____ BEING THE PARENT / GUARDIAN OF

DO HEREBY INDEMNIFY THE NORTHWEST CHRISTIAN SCHOOL AND PERSONNEL AGAINST ANY CLAIM ARISING FROM ACCIDENT, INJURY OR LOSS SUFFERED BY MY CHILD/CHILDREN WHILST UNDER THEIR SUPERVISION.

SIGNED (PARENT/GUARDIAN)

DATE