



**ACT'V GROUP OF SCHOOLS ENROLMENT FORM**

**THE COMPLETION OF THIS FORM IS NOT A GUARANTEE OF ACCEPTANCE OF THE PUPIL**

All children applying for a place will be subject to an assessment.

Current school fees are \$ \_\_\_\_\_ per child, per term

Non-refundable Enrolment fee \$ \_\_\_\_\_

Please attach receipt: \$ \_\_\_\_\_ application fee (non-refundable)

Certified copy of child's birth certificate

Copy of child's previous two school reports (If Applicable)

One current passport size photo of the child

This form to be returned to the school office no later than \_\_\_\_\_

**DAY SCHOOL**

**A. PUPIL DETAILS**

Surname: ..... Official Forenames: .....

Second Name: ..... (If Applicable) Date of Birth: .....

Place of Birth: ..... Birth certificate No: ..... Gender: .....

Religious Denomination: ..... Race: .....

District: ..... Form/Grade applied for: .....

Preferred School: ..... Date of entry: .....

Last school(s) attended.

Name of school	Grade/Form	Year

Any other information you feel we should know?

Name of Siblings in any ACT'V schools	Date of Birth	High/Primary School

**B. MEDICAL INFORMATION**

Name of Family Doctor: \_\_\_\_\_ Telephone No \_\_\_\_\_

Medical Aid Society: \_\_\_\_\_ Medical Aid No. \_\_\_\_\_ Suffix No. \_\_\_\_\_

Any allergies or medical problems:

**RECORD OF IMMUNISATION (To be completed by an approved medical institution)**

SURNAME: ..... NAME OF CHILD: .....

DATE OF BIRTH: .....

BCG: .....

OPV: 1..... 2..... 3.....

HBV: 1..... 2..... 3.....



DPT: 1..... 2..... 3.....

MEASLES: .....

18/12 BOOSTER: ..... OPV..... DPT.....

5/12 BOOSTER: ..... OPV..... DPT.....

(INSERT MEDICAL INSTITUTION STAMP HERE)

**C. FAMILY DETAILS**

Marital Status of mother and father:  
**Married/Divorced/Remarried/Separated/Widowed/Single/Engaged/Other (specify):** \_\_\_\_\_  
 Home Language: \_\_\_\_\_ Religion: \_\_\_\_\_  
 Which place of worship do you attend? \_\_\_\_\_  
 Name of Religious Leader: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Is either parent in full-time Religious work? Yes  / No   
 If 'Yes', please give details: \_\_\_\_\_

**D. HOME DETAILS**

Home Address: \_\_\_\_\_  
 Home Telephone: \_\_\_\_\_ Cell \_\_\_\_\_ E-mail \_\_\_\_\_

**E. FATHER'S DETAILS**

Surname \_\_\_\_\_ Forename/s: \_\_\_\_\_  
 Nationality: \_\_\_\_\_ I.D/ Passport No: \_\_\_\_\_  
 Home Address, if different to **D**: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Company Name: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 Business Telephone No(s) \_\_\_\_\_ Cell: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**F. MOTHER'S DETAILS**

Surname \_\_\_\_\_ Forenames: \_\_\_\_\_  
 Nationality: \_\_\_\_\_ I.D/ Passport No: \_\_\_\_\_  
 Home address, if different to **D**: \_\_\_\_\_

Occupation \_\_\_\_\_ Company Name \_\_\_\_\_

Business Address: \_\_\_\_\_

Business telephone No(s): \_\_\_\_\_ Cell: \_\_\_\_\_  
 Email: \_\_\_\_\_

**G. INVOICING DETAILS**

Name of person who is responsible for payment of school fees  
 Surname: \_\_\_\_\_ Initials \_\_\_\_\_ Title: **Mr/Mrs/Miss/Ms/Rev/Doc**



Postal Address: \_\_\_\_\_

Personal Email: \_\_\_\_\_

**H. LEGAL GUARDIAN** *(If applicable)*

Surname: \_\_\_\_\_ Forename/s: \_\_\_\_\_ Title: \_\_\_\_\_

Nationality: \_\_\_\_\_ I.D/ Passport No: \_\_\_\_\_

Home Address, if different to D:  
 \_\_\_\_\_

Occupation: \_\_\_\_\_ Company Name: \_\_\_\_\_

Business Address:  
 \_\_\_\_\_

Business Telephone No(s): \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_

**I. EMERGENCY CONTACTS** *(Must be people who are willing and able to come within a short time, to collect and care for child, if school has been unable to contact mother or father)*

**Contact #1** Name: \_\_\_\_\_

Home Telephone no. \_\_\_\_\_ Bus Telephone no. \_\_\_\_\_

Cell: \_\_\_\_\_ Relationship to family: \_\_\_\_\_

**Contact #2** Name: \_\_\_\_\_

Home Telephone no. \_\_\_\_\_ Bus Telephone no. \_\_\_\_\_

Cell: \_\_\_\_\_ Relationship to family: \_\_\_\_\_

I would like my child to attend \_\_\_\_\_ (Name of School of choice) for the following reasons:  
 \_\_\_\_\_

**HOW DID YOU GET TO KNOW ABOUT US?  
 PLEASE TICK BELOW**

RADIO STATION:

SOCIAL MEDIA

A FRIEND/ FAMILY MEMBER

ZITF

FLIERS/ POSTERS

**IT IS ESSENTIAL FOR PARENTS TO READ THE ATTACHED CODE OF DISCIPLINE BEFORE SIGNING THE DECLARATION BELOW:**

**DECLARATION**

- I, \_\_\_\_\_ parent/guardian of \_\_\_\_\_ fully understand that:
- ACT'V Group of schools cherish and practise the Zimbabwean philosophical orientation of *Unhu/Ubuntu/Vumunhu* and all children attending will be taught tenets of these values and are expected to comply with the rules and routines thus implied. No exemption from any part of the curriculum will be considered on religious or any other grounds.
  - The decision of the Head/Acting Head with regard to admission to the school shall be final and not be subject to question or discussion.
  - Once a place is offered and accepted, the deposit stipulated in the offer letter must be paid to secure the place. In the event of failure to take up an accepted place, the full deposit will be forfeited.
  - In the event of any emergency arising, whether medical or otherwise, relating to my child, in which in the opinion of the Head it is not reasonably possible for effective communication to be established with either parent, the Head shall have authority, *in loco parentis*, to make and cause and allow to be carried out any decision considered necessary in the interest and welfare of my child and/or of the School and/or of the student body and/or of the Responsible Authority.
  - The School's rules and regulations, as amended from time to time, shall bind and be observed by my child and, insofar as they may concern me, also by me. I further accept that by signing this enrolment contract I will be eligible to be a member of the ACT'V Group of Schools Development Committee and be bound by its constitution, which is available to me on request.
  - The fees, levies and non-refundable enrolment fees determined by the Board of Directors, and endorsed by the School Development Committee from time to time are subject to revision without previous notice, and are payable in advance, on or before the first day of each term. Interest will be charged on overdue accounts, the rate being determined periodically by the School/Responsible Authority having due reference to prevailing market conditions.
  - In view of the fact that the School is a non-profit-making concern, I agree to pay all tuition fees, levies and deposits for the education of my child as raised by the School. Failure to pay the fees by the due date or to meet the terms of any agreed payment plan will result in my child being withdrawn from classes.
  - The Head shall have the right to refuse to allow my child to return to school for any term at the beginning of which the previous term's fees have not been fully paid.
  - My child will fulfil the legal requirements of days at school and will not be absent from school during the term unless sick (in which case a written explanation will be provided immediately on return to school) or for a special occasion, as approved by the Head in writing, in advance.
  - In the event of my child being withdrawn from the School, a full term's notice shall be given in writing and handed to the Head not later than noon on the first day of the term in question, failing which the full fees for the following term will be charged.
  - The Head has the authority to suspend, exclude, expel or to request the removal of my child for any cause judged by the Head to be sufficient, and that I shall nevertheless be liable for the full term's fees for the term during which such suspension, exclusion, expulsion or removal takes place.
  - This enrolment contract is for the period that my child is enrolled at \_\_\_\_\_ (*Insert Name of preferred School*) until my child completes his/her schooling, on condition that I have met all financial obligations to the School as determined by the Board of Directors/School and SDC from time to time.
  - I consent to the jurisdiction of the Magistrate's Court in Zimbabwe notwithstanding the fact that the amount of the claim may exceed the jurisdiction of such Magistrate's Court in respect of any legal action taken against me for outstanding school fees and additional charges incurred, together with interest, collection commission, tracing agents' fees and any other legal costs on the attorney/client scale.
  - I have read the ACT'V Group of Schools Code of Discipline and undertake to support the school and my child in observing its requirements.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**CO-CURRICULAR PROGRAMME**

All pupils are expected to take part in the school's co-curricular programme, for which as wide a range of choice as possible is offered.

**Attendance at co-curricular activities and matches/school activities carries the same priority as attendance at lessons. I will ensure that my child will represent ACT'V Group of Schools if selected.**



I (parent/guardian's name) \_\_\_\_\_ understand the foregoing and will ensure that my son/daughter is equipped and attends his/her co-curricular and other school responsibilities.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INDEMNITY**

Whereas

- 1) I am a parent or legal guardian, or responsible agent duly authorised by a parent or legal guardian of a child or children presently attending \_\_\_\_\_ (“Name of School”).
- 2) I am aware that it is possible for an accident or injury to befall learners during their attendance at the School’s premises and its environs, or at functions, meetings, events and other such activities that may take place outside of the School’s premises and environs from time to time, and whilst in transit between the School and its environs and such venues.

Now Therefore:

I hereby and unconditionally indemnify and hold as harmless the ACT’V Group of Schools Board of Directors, ACT’V Group of School Head Quarters, School authorities, and any of the ACT’V Group of Schools’

employees and any of the ACT’V Group of Schools or School’s duly authorised agents, from and against all loss, liability, damage, cost or expense, and from all claims, demands, suits and proceedings, including any consequential loss, arising from any injury, accident, harm or otherwise which may befall the child or children in my charge whilst such child or children are attending at the School and its environs; or at the venues where the said functions, meetings, events and other such activities may take place, or whilst in transit between the School and its environs and such venues.

I am satisfied that the School, through its employees and/or authorised agents, will at all times endeavour to ensure that the said child or children will be properly looked after, cared for and protected whilst at the School’s premises and its environs, or at functions, meetings, events and other such activities that may take place outside of the School’s premises and environs from time to time and whilst in transit between the School and its environs and such venues.

\_\_\_\_\_  
 Name of parent/guardian                      Signature of parent/guardian                      Date

*ACT’V Group of Schools admit learners of any race, colour, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, colour, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.*



**NB: THE SCHOOL RESERVES THE RIGHT OF ACCEPTANCE**

**FOR OFFICIAL USE**

Total fees payable: \_\_\_\_\_  Accepted  Rejected  Referred

Enrolled for: Grade/Form: \_\_\_\_\_ Student Number: \_\_\_\_\_

Name of School admitted to:

Signed: \_\_\_\_\_

**Registrar’s**

**Comments:**

\_\_\_\_\_  
 \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_