

AMITY INTERNATIONAL SCHOOL

AFTER CARE ENROLLMENT FORM – 2024

Date: _____

Child's age: _____

Child's Birthday: _____ Nickname: _____

Address: _____

CONTACT INFO:

Mom's name: _____

Dad's name: _____

(Mother) Home Phone No: _____

(Mother) Work Phone No: _____

(Mother's) Cell Phone No: _____

(Mother's) Email: _____

(Father) Home Phone No: _____

(Father) Work Phone No: _____

(Father's) Cell Phone No: _____

(Father's) Email: _____

Emergency Contact Person: _____

Contact's Phone No: _____

Emergency Contact Person: _____

Contact's Phone No: _____

SERVICE INFO:

Beginning date needing care:

Times you plan to pick up your child: 17h00

YOUR CHILD'S HEALTH: _____

CHILD'S HEALTH RECORD: General state of health:

Doctor's name: _____

Doctor's phone number: _____

Does your child have any know allergies?

Are you concerned that your child may be prone to any type of allergies? _____

Describe: _____

Does your child have any medical conditions which I should be made aware of?

Has your child had the following common childhood illnesses?

(please circle)

Does your child have any problems with any of these?

Has your child had any of these diseases?

Constipation

Asthma

Convulsion

Bronchitis

Diarrhea

Chicken Pox

Fainting Spells

Diabetes

Frequent Colds

Heart Disease

Frequent Ear Infections

Hepatitis

Frequent Sore Throat

Impetigo

Lice

Measles

Ringworm

Mumps

Skin Rash

German Measles

Soiling

Polio

Stomach Upsets

Scarlet Fever

Urinary Problems

Tuberculosis

Worms

Whooping Cough

Other (Please specify):

Does your child have any speech, hearing or visual problems?

Would there be any restrictions to activities?

What language(s) are spoken at home?

Are there any other comments or information you would like to let me know about?

Any specific concerns?

Amount per month: R800

Amount per day: R80

**Upfront by the 1st of the
month – for that month**

Date

Signature

AMITY INTERNATIONAL SCHOOL

AFTER-CARE FEES – 2024

After-care fees are **R800 per month. Fees are payable in advance and must be paid directly to Amity International School.**

Bank: ABSA

Account Name: Amity International School

Branch: Quagga Centre

Branch Code: 632005

Account Number: 4081982920

Children must be picked up by no later than 17:00. If a parent will be late, the after-care facilitator must be notified at least two hours before hand. A penalty of **R100** will be charged for every **30 minutes** that a parent is late.

Please also take note that although there will be school/public holidays, the full after-care fees for that month will still be applicable.

A notice period of 1 month must be given to the school if your child will not be attending after-care.

PROGRAMME FOR AFTER-CARE

Children will be following this programme on a daily basis. Times will differ depending on the dismissal times.

- Freshen up and change into comfortable clothing
- Have lunch
- Homework
- Nap time / Homework for senior learners
- Play activity
- Snack time
- Reading & story time / Homework for senior learners