Crowies Place cc

2009/125805/23
147 Beaufort Street
Goodwood
7460

Email : info@crowiesplace.co.za
Cell : 082 046 5862

Holiday Enrolment Form:

Holiday Program: _____ Year : _____

Student Information

- Child's Full Name: _____
- Date of Birth: _____
- Age: _____
- Grade: _____
- Home Address: _____
- Aftercare Status: [ ] Currently Enrolled (R85/day) [ ] Public (R160/day)

Parent/Guardian Information

- Full Name: _____
- ID Number: _____
- Contact Number (Cell): _____ (Work): _____
- Email Address: _____

Emergency Contact (If parent is unreachable)

- Name: _____ Relation: _____
- Cell: _____

Medical & Dietary Profile

- Allergies (Food, Bee stings, Latex, Glue): _____
- Chronic Medications/Conditions: _____
- Medical Aid Name & Number: _____
- Main Member Name: _____

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Collection Authorization

- Person(s) allowed to collect my child: _____
- Person(s) NOT allowed to collect my child: _____

_____

INDEMNITY & CONSENT AGREEMENT

I, the undersigned Parent/Guardian of the above-mentioned child, hereby agree to the following:

1. General Liability: I understand that while all reasonable precautions will be taken for the safety and care of my child, Crowies Place CC, its Principal, and staff shall not be held liable for any injury, loss, or damage to person or property during the program.

2. Off-Site Activities (The Park): I give permission for my child to participate in supervised walks and activities at the local public park for exercise, picnics, and outdoor play. I understand these activities are supervised but involve inherent risks of outdoor play.

3. Emergency Medical Care: In the event of an emergency, I authorize the staff to seek medical assistance for my child if I cannot be reached immediately. Any costs incurred will be for my account.

4. Craft & Food: I consent to my child participating in craft activities (using glue, paint, sequins) and consuming the lunch provided (Mac N Cheese, Grilled Cheese, Hot Dogs, Boerie Braai, Fruit, and Juice), unless otherwise stated in the medical section above.

5. Media Consent (Optional):

[ ] I give permission /

[ ] I DO NOT give permission for photos of my child's artwork or my child participating in activities to be used for the center's social media/marketing.

Parent/Guardian Signature: _____ Date: _____