

Child's Details (If child has siblings applying as well, list oldest child details) **First Name** Surname Known as **Date of Birth** Gender **Dominant Hand** (DD/MM/YYYY) OMale ORight-handed OLeft-OFemale handed **Home Language Previous School** Age **School Day Option** O Half Day (08:00 – 13:00) Full Day (08:00 – 17:30) **Guardian 1 Details First Name** Surname $\bigcirc_{\mathsf{Ms}} \bigcirc_{\mathsf{Mr}}$ Relation to Child **Identification Number Identification Type** O_{ID} O_{Passport} Mobile Number Alternative Contact Number E-mail Address **Residential Address** Postal Address Occupation **Guardian 2 Details** First Name Surname \bigcirc_{Ms} Relation to Child **Identification Type Identification Number** O_{ID} O_{Passport} Mobile Number **Alternative Contact Number** E-mail Address Residential Address Postal Address Occupation



Medical Details Doctor / Paediatrician		Contact Number
		
Medical Aid Scheme	Medical Aid Option	Medical Aid Number
Main Member First Name	and Surname	I
Emergency Contacts		
Name and Surname		Contact Number
Relation to Child		
Name and Surname		Contact Number
Relation to Child		
Name and Surname		Contact Number
Relation to Child		
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Person Responsible of Pa	yments	Contact Number
Person Responsible of Pa Name and Surname	yments	Contact Number
	yments	Contact Number
Name and Surname Relation to Child		Contact Number
Name and Surname Relation to Child General Information on Ch	nild	
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Siblings Also Applying – Please list in descending order of ages of children

First Name	Surname	Known as
FIIST Name	Surname	Kilowii as
Date of Birth	Gender	Dominant Hand
(DD/MM/YYYY)	O _{Female} O _{Male}	ORight-handed OLeft-
		handed
Home Language	Previous School	
Age		
School Day Option	O Half Day (08:00 – 13:00)	O Full Day (08:00 – 17:30)
	ies, previous illnesses, physical including therapy (occupational mentation attached hereto:	
First Name	Surname	Known as
Date of Birth	Gender	Dominant Hand
(DD/MM/YYYY)	O _{Female} O _{Male}	Right-handed OLeft-handed
Home Language	Previous School	
Age		
School Day Option	O Half Day (08:00 – 13:00)	O Full Day (08:00 – 17:30)
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General Information on Child

Family history, known allergies, previous illnesses, physical or learning difficulties, past or present medical

First Name	Surname	Known as
Date of Birth	Gender	Dominant Hand
(DD/MM/YYYY)	OFemale OMale	Right-handed Cleft-handed
Home Language	Previous School	
Age		
School Day Option	O Half Day (08:00 – 13:00)	O Full Day (08:00 – 17:30)
resent medical treatme	n Child llergies, previous illnesses, physic nts including therapy (occupation ocumentation attached hereto:	
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conditions.

	APPLICATION FORM 2023
Term	s and Conditions
1.	We reserve the right of admission and the right to request a parent to remove a child from The Little Lotus Academy should we consider this to be in the interest of the child.
2.	The Little Lotus Academy is a non-denominational multilingual institution.
	School Fees are payable on or before the 27th of every month.
4.	Fees paid after the 3rd will be subject to a late fee penalty of N\$400, Should fees be outstanding for 2 or more months the child may be suspended from school and the account will be handed over to our attorney for collection. Refunds are not made for cancellation of
	application, absence due to illness or holiday.
5.	Fees are calculated on an annual basis. Guardians have the following payment options: a. Full payment before the commencement of the academic calendar year; b. Annual fees charged monthly over a period of 12 months (January - December). c. One School Term notice, in writing is required before removing your child from
	our school, or payment in lieu thereof is required.
I, the ι	undersigned, acknowledge that I have read and understood the Terms and Conditions of The

Little Lotus Academy and that my signature hereto consider myself bound by such rules and

I am acquainted with the fee payment schedule and the requirements pertaining thereto.

My accountability in terms of the previous paragraph will not be affected through my ignorance of these requirements.

This agreement will remain valid until all obligations have been met even if my child has been withdrawn from the school,

The Little Lotus Academy shall have the right to summarily dismiss my child if false or incorrect information has been supplied by me.

I waive the right to claim against The Little Lotus Academy, its staff, or agents for damages, howsoever caused, against my property or person, or injury, or death, to my child, myself or my family while any of them are on the premises of Little Lotus Academy or while any of them are on an excursion organised by the school or any other premises used by Little Lotus Academy in the furtherance of the education of my child

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I/We hereby accept and agree to Little Lotus Terms and Co	nditions
Guardian Signature(s)	Date



PAYMENT SCHEDULE 2023

Enrolment Fee – N\$ 2,500.00 per child payable upon acceptance. This is a once-off, non-refundable amount.

Monthly fees: 2,800.00 per month

Annual fees: N\$ 31,920 after 5% discount

School Teaching hours: 08:00 - 13:00

Aftercare: 13:00 - 17:30

Drop off from 06:45

Pick up before 17:30

Banking Details

Bank: Bank Windhoek

Account No.: CHK-8024 816 851

Branch: Maerua Mall

Branch Code: 483 872

Reference: Child's Full Name