



Lord Milner School

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Settlers, 0430

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FOR OFFICE USE ONLY

Admission No:	
Laundry No:	
Boarding Home Name:	

APPLICATION FOR ADMISSION TO LORD MILNER SCHOOL

N.B. THIS FORM MUST BE COMPLETED IN FULL BY THE PARENT/GUARDIAN/PROXY AND HANDED IN AT THE SCHOOL WHICH THE CHILD ATTENDS AT PRESENT. THE RECOMMENDATION BY THE PRESENT PRINCIPAL MUST BE COMPLETED.

THE DECISION OF THE ENROLMENT PANEL WILL BE FINAL. NO CORRESPONDENCE OR FURTHER DISCUSSION WILL BE ENTERED INTO.

THIS APPLICATION WILL NOT BE CONSIDERED UNLESS THE FOLLOWING DOCUMENTATION IS ATTACHED:

- | | |
|----------------------------------|--|
| 1. COPY OF THE BIRTH CERTIFICATE | 2. COPY OF MOST RECENT REPORT |
| 3. 2 I.D PHOTOS | 4. PROOF OF INCOME AND BANK STATEMENTS |

IMPORTANT NOTICE

All applications for admission to Lord Milner School close at the end of the 2nd Term.

APPLICATION FOR: Day Learner Boarder Grade For the school year

DETAILS OF PUPIL:

Surname

First names (in full)

Name by which learner is called

Male Female Present GradeDate of birth

I.D. Number

Home Language.....Nationality.....Religion.....

Number of children in familyPosition of learner in family (e.g. First)

NAME/S OF BROTHERS, SISTERS	PRESENT SCHOOL

REASONS FOR APPLYING FOR BOARDING:

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Present school

Telephone number

Fax number

Address.....

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Have all financial obligations to the school been met by the parent/guardian?

FULLY PAID		LARGELY PAID		LARGELY UNPAID		UNPAID	
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RECOMMENDATION BY PRESENT PRINCIPAL

(Application will not be accepted if this paragraph is not completed).

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.....
Date

.....
Principal

EMERGENCY CONTACT / NUMBERS

Should it at any time be impossible to contact me directly, you may contact the following friends/relatives:
Kindly supply at least 4 numbers

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.....

INFORMATION REGARDING PARENT/S OR GUARDIAN/S

	FATHER	MOTHER	GUARDIAN (where applicable)
SURNAME			
FIRST NAMES			
HOME LANGUAGE			
OCCUPATION			
EMPLOYER			
IDENTITY NUMBER			
MARITAL STATUS MAR/DIV/WID/SINGLE			
LEARNER RESIDES WITH	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
PHYSICAL ADDRESS			
TOWN			
POSTAL CODE			
POSTAL ADDRESS			
POSTAL CODE			
TELEPHONE (HOME)			
TELEPHONE (WORK)			
CELLPHONE			
E-MAIL ADDRESS			
PERSON RESPONSIBLE FOR FEES (TICK THE BOX)	FATHER <input type="checkbox"/>	MOTHER <input type="checkbox"/>	GUARDIAN <input type="checkbox"/>

PERSON(S) AUTHORISED TO COLLECT BOARDER FROM SCHOOL:

SURNAME & INITIALS			
CONTACT DETAILS	(W)	(W)	(W)
	(C)	(C)	(C)
RELATIONSHIP			

PERSON(S) **NOT** AUTHORISED TO COLLECT BOARDER FROM SCHOOL:

SURNAME & INITIALS			
CONTACT DETAILS	(W)	(W)	(W)
	(C)	(C)	(C)
RELATIONSHIP			

SCHOOLS (GRADE R INCLUDED) ATTENDED

NAME OF SCHOOL	DATE OF ADMISSION		DATE OF DEPARTURE	
	DATE	GRADE	DATE	GRADE

UNDERTAKING BY PARENT / GUARDIAN / PROXY

(a) **Code of Conduct:**

I am aware that my child will be subject to Boarding Home regulations as well as to the rules of the school at all times. (See signed Code of Conduct)

I, as parent, agree to comply with the rules of the Boarding Home and school, and undertake to:

- (i) **PAY THE FEES IN ADVANCE, EVERY TERM. (THE GOVERNING BODY RESERVES THE RIGHT TO EXCLUDE PUPILS WHO'S FEES ARE NOT FULLY PAID.)**
- (ii) Compensate for any damage to boarding home/school property caused by my child, whatever it may be.

Signature

(b) **Transport**

I am aware that the Boarding Home is closed during school holidays and Compulsory Out Weekends, and that it is my responsibility to provide transport for my child to and from boarding home at my own expense.

Should I make use of transport provided by the school, I undertake to comply with the stipulated procedures, booking two weeks in advance.

Signature

1. I have no objection to my child attending inter-denominational church services on Sundays.

Signature

2. I have no objection to my child reasonably participating in the extra-mural activities of the School and Boarding Home. (Medical factors will be taken into consideration).

Signature:

3. I indemnify Lord Milner School and its headmaster and educators against any claims of any nature arising;

- i. Out of the conduct and acts of the learner.
- ii. Out of events connected with traveling
- iii. School activities generally.

I waive any claim against Lord Milner School and its headmaster and educators and employees for anything bona fide done under this authority.

THUS SIGNED at on this

day of:20.....

.....



Lord Milner School

INDEMNITY FORM

I, the undersigned

being the father / mother or legal guardian of

(hereinafter referred to as the Learner)do hereby give my consent that the said learner may participate in all activities at Lord Milner School, Settlers, as determined by the Headmaster of the school or by the educator in charge of the learner from time to time, including sport and travelling with respect to such authorised school activities.

I authorise Lord Milner School, acting through its headmaster or an educator in charge of learners' activities within the framework of school activities, to make decisions that might be necessary in regard to medical treatment (in emergency situations only without reference to me) as may be considered necessary for the welfare of the learner.

I indemnify Lord Milner School and its headmaster and educators against any claims of any nature arising out of the conduct and acts of the learner and out of events connected with travelling and school activities generally which are undertaken in connection with such activities. I waive any claim against Lord Milner School and its headmaster and educators and employees for anything bona fide done under this authority.

THUS SIGNED at on this day of.....20.....

.....
PARENT / LEGAL GUARDIAN