

Simonstown.comb@wcgschools.gov.za

Harrington Road, Simon's Town
PO Box 38
7995 Simon's Town

Telephone: (021) 786 1056

LEARNER NAME & SURNAME												
GRADE	R	1	2	3	4	5	6	7	8	9	10	11
YEAR	2025											

THE FOLLOWING DOCUMENTS ARE REQUIRED:	ATTACHED
LEARNER'S UNABRIDGE BIRTH CERTIFICATE	
LATEST REPORT FROM PREVIOUS SCHOOL	
IMMUNISATION (CLINIC) CARD/CERTIFICATE	
PROFF OF PERMANENT RESIDENCE, e.g. TELEPHONE OR RATES ACCOUNT	
2 PASSSPORT SIZE PHOTOGRAPHS OF LEARNER	
CERTIFIED COPY OF DOCUMENTATION APPOINTING LEGAL GUARDIAN	
PROOF OF REIGSTRATION ON WCED WEBSITE	
FORM SIGNED BY BOTH BIOLOGICAL PARENTS/LEGAL GUARDIAN	
DECLARATION AGREEMENT SIGNED BY BOTH BIOLOGICAL PARENTS/LEGAL GUARDIAN	
IN CASE OF AN ABSENT BIOLOGICAL PARENT, AN AFFIDAVIT MUST BE ATTACHED	
IN CASE OF LEGAL GUARDIANSHIP OR FOSTER CARE, DOCUMENTARY PROOF MUST BE ATTACHED	

All correspondence from Simon's Town School will be via email.
Please ensure that you provide your email address:

- WCED online application 2025 will open on 11 March 2025, all applications are required to register and apply online on the Western Cape
 Education Department website.
- Online application will close on 12 April 2025. The outcome of your application will be displayed on WCED system.

		FOR OFFICE USE ON	LY
ACCEPTED	YES	NO	РНОТО
ADMISSION NO.			
LEARNER NUMBER			
DATE OF ADMISSION			

The following should be provided after interview:

Transfer form from previous school



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		1	LEARNER D	ETAILS	: Pleas	e p	rint clearly			
SURNAME				FL	JLL NAM	ЛЕ (S	S)			
ID NUMBER				DA	ATE OF	BIR	TH			
PASSPORT NUMBER				CC	DUNTRY	Y OF	BIRTH			
(if foreign national)										
GENDER (please tick)	MAL	.E	FEMALE	Н	AL AMC	NGA	AUGE			
RESIDENTIAL ADDRESS										
RELIGIOUS FAITH (for	edenin kan	e Company of the Comp		RA	ACE (for	stat	tistical purpose	s)		
Position held in family										
Pa	rticulars of	siblings both	n at school and	d not at s	school a	nd d	lepend on the s	same person a	s learner:	
FIRST NAME AND SURN	AME		,	снооі	L				GRADE	
	I Low-Saller	Maria de la compansión de			dumilie					
			PARENT / LEG	GAL GU	ARDIAN	INI I	FORMATION			
Marital Status of Biological Par	ents Ma	rried	Single	Divo	rced		Separated	Life Partne	rs Widows	Remarried
Child Resides with Mother Father Both Parents Legal Guardian										
PARENT 1/ADOPTIV	E PARENT	AL / LEGA	L GUARDIAN			P	PARENT 2/AD	OPTIVE PAR	ENTAL / LEGAL	GUARDIAN
PARENT ROLE					PARE	ENT	ROLE			
TITLE AND SURNAME					TITLE	E AN	ID SURNAME			
FIRST NAME					FIRST	T NA	AME			
ID NUMBER					ID NU	JMB	ER	I		
RESIDENTIAL ADDRESS					RESII	DEN	ITIAL ADDRES	SS		
HOME NUMBER							JMBER			
CELL PHONE NUMBER					CELL	. PH	ONE NUMBER	R		
OCCUPATION					occi					
EMPLOYER/COMPANY					EMPL	OY	ER/COMPANY	′		
WORK TELEPHONE					WOR	K TE	ELEPHONE			
EMAIL ADDRESS					EMAI	L A	DDRESS			
			EM	ERGEN	CY CON	ITAC	СТ			
Relationship to learner (Please indicate with X)	Uncl	e/Aunt	Legal Guardian	Step P	arent	Gra	andparent	Other (Plea	se specify):	
Full Name and Surname		'				Tit	le			
Physical Address										
Contact Details	Cell	Phone:				Wo	ork Phone:			
Emails Address:										



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			LEARNER	R ACAI	DEMIC RE	CORD		
Current School					Current	Grade		
Reason for leaving?								
Is the learner registered to receive a	Social C	Grant						
Has the Learner previously repeated	l a grade	? If so, ple	ase specify					
			ME	DICAL	DETAILS			
Name of Medical Aid						Membership No'		
Main Member's Name & Surname								
If required, my child must be taken to	a:	PRIVATE I	HOSPITAL		GOVERNI	MENT HOSPITAL		NAVAL HOSPITAL
Cape Medical Response Member			Yes		No	Membership No`		
Operations the Learner has had:				0				
Does your child require any special medi	ical suppo	ort or chronic	medication? Ple	ease spe	cify if so:			
Please specify any allergies your child ha	as: (pean	uts, bee sting	gs etc):					
Has your child ever required remedial or	support ti	nerapy? If so	o, please supply	a brief de	etail (e.g Phy	sical/Academic/Psycholog	gical):	
			PAREN	TAL CO	NSENT FO	DRM		
I (full name of parent/ guardian),							3126	
(home address)						the parent/guardi	an of (full	name of learner)
			The state of the s	7				ra-mural activities of the school,
including recognised sports offered by Town School.	y the sch	nool, educa	itional tours an	d excurs	sions of hist	orical, cultural, or geog	graphical i	nterest while attending Simon's
I fully understand and accept that par myself, my executors, my spouse and educational institution against any or child aforesaid while taking part in sporesponsible precautions for the safet	d child at all claim ort or in	oresaid to s whatsoev course of a	indemnify, holo ver that may an my such tour o	d harmle ise in co	ess and abs onnection w	olve Simon's Town Sci th loss of or damage to	hool, the e the prop	educator in charge or any other perty or injury to the person of my
I hereby acknowledge that I know an	d under	stand the c	ontents of this	Consen	t and Inden	nnity Form.		
Please indicate your position on Socia	al Media	Presence	for your child (you can	change this	s at any time):		
I would like my child to be feature	ed on the	school's r	nedia presence	Э				
I would like my child to be feature	ed withou	ut any iden	tifying informat	ion pres	ent i.e. no f	ace or name shown		
I would not like my child to be feat	atured or	the schoo	l's Social Medi	a at all.				
SIGNED AT				(ON THIS _	DAY OF		
SIGNATURE OF FATHER:								
SIGNATURE OF MOTHER:								
SIGNATURE OF GUARDIAN:			e.					
SIGNATURE OF WITNESS: 1								
2			(4.11.)	·				



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2024 SCHOOL FEES						
FOUNDATION PHASE	INTERSEN PHASE	GET PHASE	FET PHASE			
R9 875.25 Per annum (less 10% if you paid in full before end of February 2024)	R11 539.50 Per annum (less 10% if you paid in full before end of February 2024)	R13 086.15 Per annum (less 10% if you paid in full before end of February 2024)	R14 957.25 Per annum (less 10% if you paid in full before end of February 2024)			
R987.53 Per Month X10 months (February-November)	R1 153.95Per Month X10 months (February-November)	R1 308.62 Per Month X10 months (February-November)	R1 495.73 Per Month X10 months (February-November)			
R2 468.81 Per term in advance (February, April, July, October)	R2 884.88 Per term in advance (February, April, July, October)	R3 271.54 Per term in advance (February, April, July, October)	R3 739.31 Per term in advance (February, April, July, October)			
DISCOUNT						

If the full amount is paid before 31 December 2023, you will be entitled to a 12% discount on your annual fees. If the full amount is paid before the end of February 2024 you will be entitled to a 10% discount on your annual fees.

	BANKING DETAILS	
ACCOUNT NAME:	Simon's Town School	
BANK:	First National Bank	
BRANCH:	Longbeach Mall	
BRANCH CODE:	250 655	
ACCOUNT No:	620 331 206 69	
ACCOUNT TYPE:	Cheque/ Current Account	
REFERENCE:	YOUR CHILD'S NAME AND SURNAME	

SCHOOL FEE RESPONSIBILITY

In order to provide quality education at Simon's Town School, it is the responsibility of every parent to pay school fees.

Those parents who qualify for reduction are supported by the paying parents and NOT THE STATE.

It is our responsibility to assist financially destitute parents WITHIN the Simon's Town Community but it would be unfair to expect paying parents to assist those from outside the community if they have a school servicing their community.

In terms of Section 39 of the South African Schools Act, parents are liable for compulsory school fees.

In terms of Section 40 of the South African Schools Act, the school may enforce the payment of school fees.

In terms of Family Law, parents are jointly and several liable for payment of learners' fees - REGARDLESS OF MAINTENANCE AGREEMENTS, etc.

In the case of non-payment, action will be taken against both parents, regardless of any maintenance agreements that may exist between parties.

Parents will be held liable for any legal costs that arise out of such actions.

The school may record failure to meet school fee obligations with credit information burea. This information will be available to other credit grantors and maybe used in making credit risk management related decisions.

Please Note: After 3 consecutive months of non payment we reserve the right to hand you over to our debt collectors.

SCHOOL FEES ARE ADJUSTED ANNUALLY

SCHOOL FEES ARE PAYABLE IN ADVANCE

I/WOULD LIKE AN APPOINTMENT TO SEE THE BURSAR REASON:

I/WE, THE UNDERSIGNED, UNDERSTAND THAT IT IS MY/OUR RESPONSIBILITY TO COVER THE SCHOOL FEES OF THIS CHILD'D TUITION. I/WE FURTHER UNDERSTANDTHAT I/WE WILL BE LIABLE FOR ANY LEGAL COSTS INCURRED SHOULD NON-PAYMENT OCCUR.

SIGNATURE:	SIGNATURE:	
FULL NAME:	FULL NAME:	
RELATIONSHIP TO CHILD	RELATIONSHIP TO CHILD	



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SCHOOL RULES

- 1. We hereby apply to have the child whose name appears on this form, registered as a learner at SIMON'S TOWN SCHOOL and confirm that he/ she complies with the basic criteria.
- 2. I/ We hereby certify that I/We have legal custody and or / guardianship in respect of the above named learner.
- 3. I/We undertake to adhere to the school rules and disciplinary code and to the various alterations in the rules and disciplinary code that may be made from time to time.
- 4. I/We understand and confirm that the Principal or any person duly authorised, will act *loco parentis* in any matter and at any time during which I/ we have entrusted our child to the care of the school.
- 5. I/We understand that while every reasonable effort will be made to prevent losses or damage to learner's clothing and equipment, the school cannot be held liable for such.
- 6. I/We undertake to reimburse the school for any damage to school property that may be caused by our child.
- 7. I/We jointly and severally undertake to pay school fees and I/we understand the following:
- 7.1 The annual school fees will be compulsory sum per annum (see School Fess Schedule) as adopted by majority of parents at the Annual General Meeting.
- 7.2 The school fees may be paid off in ten(10) monthly instalments beginning 31 January through to 31 October.
- 7.3 In terms of Section 40 of the South African Schools Act, the school may enforce the payment of these compulsory fees.
- 7.4 The parties to this application undertake to pay all legal costs including attorney / client fees and collection costs incurred by the school in event of the school having to take legal action for the recovery of school fees.
- 7.5 Parents who are unable to pay school fees may apply for exemption from these fees.
- 8. I/We undertake to give notice in writing of any intention to remove my / our children / from the school and furthermore to return any books and / or equipment belong ings to the school that our child may have.
- 9. I/We agree that our child be permitted to undertake group Edumetric and Psychometric tests that have been approved by Director of Education
- 10. I/We that if our child is over the compulsory school-going age (15 years), he/she will attend school regularly and will only be absent for medical reasons.
- 11. I/We understand that the school reserves the right to verify all information supplied to them via this application. In the event of fraudulent documents being submitted, the school reserves the right to lay a criminal charge of fraud against any of the parties to this application.
- 12. I/We accept responsibility for immunising our child / children against contagious diseases and normal infections and shall produce proof thereof if required to do so.
- 13. I/We accept the responsibility of the learner's transport to and from the school.

I hereby also acknowledge that I have read the School Rules and my child will abide by the rules.

- 14. I/We undertake to inform the child's Register Educator by means of written note of the child's/ children's absence from school and I/We declare that we are prepared to produce a doctor's certificate if and when required to do so.
- 15. I/We undertake to support the school's constitution and policy of admission as defined and implemented by Governing Body of the school.
- 16. I/We understand that smoking in school uniform and the abuse of any drug or alcoholic beverage is an infringement of the critical school rules and will not, under any circumstances, be tolerated. I/We further understand that random searches conducted by the SAPS and other relevant authorities with respect to drug use/abuse will be allowed (see attached letter).
- 17. I/We understand that all cell phones, MP3 players, portable CD players, or any other means of electronic entertainment are not allowed at the school (by prior arrangement, cell phones may be left at the office in the morning and collected again in the afternoon). I/We further understand that these items will be Confiscated and will only be returned to parent /guardian of the child concerned.
- 18. I/We understand that this commitment in its entirety will be valid from the day on which the entire admission/registration form is signed by the parent / guardian to the day on which the child officially leaves the school. The Governing Body reserves the right to reconsider the admittance of children to the school.

The Parent/Guardian declares that he/she is the legal guardian of the child and is entitled to sign this document and shall be bound hereby both as Parent /Guardian and in his personal capacity.

ADDRESS: The signatory hereto chooses domicilium citandi et executandi (official address) as:								
		Postal Code:						
SIGNED on the	day of	20	SIGNATURE OF PARENT / GUARDIAN					

WITNESS



Simon's Town School



SUBJECT CHOICE for GRADE 10,11 and 12 in the FET-BAND

Your name	and su	ırname:					•
Class: (Grade						
		ubjects from Grade Orientation — so, no Inbined as indicate NOT pick two su With an X in the s				ompulsory subject for s available in Simon's To pick one subject in e is an 8 th subject.	own ach
GROUP 1		ENGLISH 1st LANGU	AGE		PH	HYSICAL SCIENCES	
	XHOSA 1st LANC		GE	GROUP 4	HI	STORY	
GROUP 2		ENGLISH 2nd LANGU	AGE		TE	OMPUTER APPLICATIONS ECHNOLOGY COMPUTER STUDIES) (30)	
		AFRIKAANS 2nd LANG	GUAGE	GROUP 5	l N	AUTICAL SCIENCES	
GROUP 3		MATHEMATICS (ONLY IF 55% WAS OBTA	•	GROOP 3	(C M Ph	DNLY IF YOU HAD PICKED ATHEMATICS IN GROUP 3 A HYSICAL SCIENCE IN GROU FTER SCHOOL SUBJECTS.	AND P 4)
		MATHEMATICAL LITE	RACY			ARINE SCIENCES	
		1			GI	EOGRAPHY	
GROUP 6		MARITIME ECONOMI	CS			USINESS STUDIES BUSINESS ECONOMICS)	
		HOSPITALITY STUDII (20=Maximum Learne					
		LIFE SCIENCES (BIOL	.OGY)	GROUP 7		LIFE ORIENTATION (COMPULSORY FOR ALL GRAD	
COMPULSO		MATHEMATICS PHYSICAL SCIE		COMPULSOR SUBJECTS		MARINE SCIENCES MARITIME ECONOMICS	
EXTRA SUBJECT		NAUTICAL SCIE	NCEC			LIFE ORIENTATION	-
PARENT'	S SIGN		LEARNER'S	S SIGNATURE	 ED	UCATOR'S SIGNATURE	 E