

THE AFTERCARE OFFICE

Aftercare Manageress – K. HARTUNG

☎ 021 - 8510396

✉ keri@beaumont4u.co.za



BEAUMONT
PRIMARY / LAERSKOOI

Beaumont Aftercare offers home from home care, in a loving, safe environment, rendering support services to working parents.

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ADMISSION

- ♣ Only Beaumont Primary School Learners
- ♣ Application forms available from Keri at the Aftercare

TIMES & SERVICES

- ♣ Monday to Friday 13:00 – 18:00
- ♣ Last day of Term 11:00 – 17:00
- ♣ Lunch & snacks included
- ♣ Supervision of learners, inclusive of homework
- ♣ Send learners to school sport & activities
- ♣ School holidays – booking & payment in advance
- ♣ Closed on public holidays
- ♣ Aftercare closes at 18:00, late fines charged if learners collected after 18:00

DRESS

- ♣ Learners may change into civvies
- ♣ Learners must take responsibility for own belongings

FINANCE

- ♣ Fees loaded by Term
- ♣ Can be settled in advance & over 3 payments through the term
- ♣ One term written notice of termination of attendance

FETCHING OF LEARNERS

- ♣ Learners may not leave premises without being signed out by a parent or by other person with prior arrangement.
- ♣ Parents are to inform Aftercare when a learner will be absent from Aftercare

HOMEWORK

- ♣ Study time: Mon – Thurs 15:00 – 16:15
- ♣ Aftercare teachers assist with homework but final control remains the parents responsibility



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APPLICATION FOR BEAUMONT AFTERCARE AANSOEK OM BEAUMONT NASORG

- Please complete the application form on both sides / Voltooi asseblief die aansoekvorm aan beide kante
- Please complete separate forms for each child / voltooi aparte vorms vir elke kind
- Please note that all applications to Aftercare are subject to financial approval from the school financial office as to school fees being paid and remaining up to date first/
neem asseblief kennis dat alle aansoeke tot die Nasorgsentrum onderhewig is aan Fianansiele goedkeuring vanaf die finansiele kantoor in terme van die betaling van skoolfonds en of die betaling daarvan op datum is.
- Successful applications will be confirmed by the Aftercare Manageress / Suksesvolle aansoeke sal deur die Nasorgbestuurder bevestig word

English		Start Aftercare 2019	
Afrikaans		Grade in 2019	

Learner's Information / Kind se Inligting

First Name: Eerste Naam:	
Surname: Van:	
Date of Birth : Geb. Datum:	
Allergies (Medicine/Food/Other) : Allergieë (Medisyne/Kos/Ander):	
Emotional Problems: Emosionele Probleme:	

Mother's Information / Moeder se Inligting

First Name / Eerste Naam:	
Surname / Van:	
Home Address / Huisadres:	
(W) Tel:	
Cell/Sel:	
Email/Epos:	
Employer/Werkgewer:	
Work Address/Werk adres:	
Work hours / Werk ure:	

Father's Information / Pa se Inligting

First Name / Eerste Naam:	
Surname / Van:	
Home Address / Huisadres:	
(W) Tel:	
Cell/Sel:	
Email/Epos:	
Employer/Werkgewer:	
Work Address/Werk adres:	
Work hours / Werk ure:	

Confidential Information / Vertroulike Inligting

Is there any other confidential information we need to know of? (Eg. Adoption/Divorce/Special Needs/ etc) Is daar enige ander vertroulike inligting waarvan ons bewus moet wees? (Aanneming, Spesiale behoefte ens.)

Signature/Handtekening: _____



THE AFTERCARE OFFICE / DIE NASORGKANTOOR

Van der Merwe Str, Private Bag / Privaatsak X13, Somerset Wes/t 7129 ☎ (021) 8510396 📠 (021) 851 0396

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BEAUMONT AFTERCARE

CONSENT, WAIVER AND INDEMNITY

I, _____ (full name)

of (address), _____

being the parent/guardian of _____ (child's name) do hereby consent to my child taking part in any activities of Beaumont Aftercare, including excursions, cultural and sporting activities, whilst attending Beaumont Aftercare.

I fully understand and accept that all excursions and extra-mural activities shall be taken at my child's own risk and I therefore hold harmless and absolve the Western Cape Education Department, the School Governing Body, Beaumont Aftercare, the principal, staff and any duly authorized third parties or agents and irrevocably waive and abandon any claim or claims which I, my executors, my spouse and my aforesaid child may have or purport to have against them for damages or otherwise as a result of any harm or injury of whatever nature and however caused, as a consequence of my aforesaid child participating in an extra-mural activities of the Beaumont Aftercare. This indemnity shall not include acts of gross negligence on the part of any of the above parties.

Signature of Parent/Guardian _____

Date _____

Place _____

As witness:



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AGREEMENT BETWEEN BEAUMONT AFTERCARE FACILITIES

AND

Father / Guardian:

ID Number:

Physical Address:

Telephone Numbers: Work:

Cell:

Mother/Guardian:

ID Number:

Physical Address:

Telephone Numbers: Work:

Cell:

1. I/We confirm that the particulars furnished by me/us above, are true and correct and undertake to inform Beaumont Aftercare of any changes within 14 days of such change.
2. I/We confirm that I/we have acquainted myself/ourselves, and in future will keep myself/ourselves acquainted, with the rules of Beaumont Aftercare. I/we undertake to abide by all the rules, including any amendments thereto or any substitutions thereof.
3. I/we confirm that fees payable were explained to me/us in detail. I/We understand that the aftercare fees are for school terms only and that holiday fees will be charged for additionally. I/We understand further that fees will be payable for the months of July and December. I/we also understand that a term's notice must be given if I/we decide not to make use of the services of Beaumont Aftercare any longer. I/we understand that I/we will be held liable for fees for a full term if I/we fail to give appropriate notice and accept responsibility for the payment thereof.
4. I/we understand that all applications to Aftercare are subject to financial approval from Beaumont Primary School Financial office as to school fees being paid and remaining up to date first.
5. Both parents/guardians, where applicable, accept responsibility, jointly and severally, for the punctual payment of all fees referred to above, which may become due and payable to Beaumont Aftercare, which fees will be payable termly in advance. We consent that Beaumont Aftercare shall at all time be at liberty to proceed with collection and excussion proceedings against any one of us, should these fees not be paid.
6. The payment structure for Beaumont Aftercare is as follows:

Full Term Payments	-	Need to be received within 14 days of the new term
2 Payments per term	-	1st payment due within 14 days, 2 nd due half term
3 Payments per term	-	Only available by debit order

7. A certificate issued by any member of the personnel of Beaumont Aftercare or his duly authorized agent that purports to certify the amount due hereunder, shall be accepted as correct and prima facie proof of such indebtedness and shall have sufficient probative value to enable Beaumont Aftercare to obtain summary judgment or provisional sentence against us in any competent court, for the amount stated in such certificate and we accept the onus of disproving the amount so stated as not being the amount owing.
8. Should any payment as undertaken by me/us, not be made on due date, for any reason whatsoever, Beaumont Aftercare may immediately regard the total balance outstanding, which shall include fees, as due and payable and may issue summons thereof in any competent court, without further notice or demand to me/us.
9. Beaumont Aftercare further reserves the right to suspend their services immediately, should these fees not be paid.
10. I/we also agree that by non-payment, judgment by default can be taken against me/us.
11. If steps have to be taken against me/us to collect outstanding fees, I/we hereby agree that the costs incurred can be claimed against me/us on an attorney-and-client scale, which shall include collection commission calculated at 10% on each and every payment made in reduction of the principle debt, interest and costs. Beaumont Aftercare may allocate any payment to capital, interest and costs or any other item as they deem fit, despite any allocation made or deemed to be made by us.
12. I/we agree to the jurisdiction of the Magistrate's Court in terms of section 45 of the Magistrate's Court Act. 32 of 1944, for the recovery of any amount due in terms hereof.
13. For the purpose of serving any legal process pieces that can be issued against me/us, I/we choose the residential address above as our domisilium citandi et executandi.
14. Indemnity clause
 - 13.1 I/we (full names) being the parent of (child's name) do hereby consent to my/our child taking part in any activities of Beaumont Aftercare, including outings and sporting activities, while attending Beaumont Aftercare.
 - 14.2 I/we authorize Beaumont Aftercare in the event of my/our child/ren requiring urgent medical treatment to get appropriate medical assistance. I /we accept responsibility for the payment of the costs thus incurred.
 - 14.3 I/We undertake to immediately get the necessary medical advice or treatment if I/we have reason to believe that My/our child/ren have any contagious or infectious disease capable of creating a risk for other persons, through their participation in any aspect of Beaumont Aftercare's activities, including, without restriction, attendance of any instructional occasion or participation in Beaumont Aftercare's project, sport or recreation; and that, if in terms of such medical advice it is desirable, my/our child/ren shall withdraw from any such activity; and that I/we indemnify Beaumont Aftercare against any liability of whatever nature that may directly or indirectly arise for Beaumont Aftercare in consequence of my/our child/ren's failure to comply with this undertaking.

Signed at _____ on this _____ day of _____ 20_____

Parent/Guardian (Sir)

Parent/Guardian (Madam)

As witness: