



C 4 K - Belgravia - Tel: +27 823240358

E-mail: <u>belgravia@computers4kids.co.za</u> / <u>www.dozendream.co.za</u>

| Doze n Dream C 4 K Registration Form | | | | | | | | | |
|---|---|--------------------|-----------------|--------|-----------|-----------------|---------|------|-----|
| Learner Details: | | | Student Number: | | | Office Use Only | | | |
| First Names: | | | | | | | Gender: | M | / F |
| Surname: | | | Date of Birth: | | | | | | |
| Nick Name: | | | Day | | Mont | h | Y | 'ear | |
| Parent / Guardian / Fee Paying Party Particulars: | | | | | | | | | |
| First Names: | | | | | | | Title: | | |
| Surname: | | | | ID / P | assport N | lumber | : | | |
| Relation to Candidate: | | | | | | | | | |
| Physical | | | | | | | | | |
| Address: | | | | | Area Co | ode: | | | |
| Postal | | | | | | | | | |
| Address: | | | | | Area Co | ode: | | | |
| Telephone Number: | N | Fax lumber: | | | | | | | |
| Cellular Number: | | E-Mail Address: | | | | | | | |

Use student number provided on monthly invoice as reference number.

Bank Details:

First National Bank - Doze n Dream Trading Enterprise (Business Account)

A/C no 62841863500 Branch Code: 211021 Branch name: Vincent Park

Ref no: (Name & surname of your child)

Fees structure – 2021: EFT/CASH payments only

- Annual Registration Fee R 250.00 non-refundable.
- Monthly Fee structure SELECT FROM BELOW
 - a) Foundation Phase (Grade R -3) @ 200.00 p/m;
 - b) Intermediate Phase (Grade 4-6) = 250.00 p/m; c)
 - c) Senior Phase (Grade 7-9) @ 300.00 p/m;
 - d) Further Education and Training Phase (Grade 10-12) @ 350.00 p/m;
 - e) K 53 Learners Driver's License course @ 450.00 p/m
 - f) Adult Basic Computer Skills Course @ 550.00 p/m
 - g) Educator course @ 600.00 p/m
- FREE follow up calls and home assistance (where needed) to all learners registered for elearning.

- e-mail proof of payment and completed registration form to: <u>belgravia@computers4kids.co.za/</u>
 Lulamile.yedwa@gmail.com
- The learner may begin the first lesson once the completed registration form, Registration and first Tuition Fee payment has been received.





Terms and Conditions:

- Unpaid Tuition Fees (7 days late) will result in the suspension of learner from classes until all outstanding fees are paid in full.
- Monthly fees are payable on the last day of every month in advance over a 12 month period (January to December) first payment will be due and payable 7 (Seven) days prior to the commencement date of the first training session. Monthly fees will entitle the candidate to 1 (one) training session per week excluding school holidays.
- Learners will commence lessons once payment and completed registration form have been received.
- A notice period of 30 days is required in writing for cancellation of classes. Notice may <u>not</u> be given for November or December months.
- Late payment fee R 50.00 a week, late payment fee will be levied on all overdue accounts.
- Interest will be charged as 10% per month on arrears accounts, as well as any costs incurred on recovering outstanding fees.
- Should the above mentioned not be fulfilled, the learner may be refused entry to classes.
- A 10% cancellation fee will be levied on all confirmed bookings.
- All communication will be provided via e-mail. Please ensure that we have your correct contact details in order to promote effective communication.

Indemnity: By signing this form I give consent that my son/daughter may attend classes at Doze n Dream C4K Centre. Furthermore indemnify, hold harmless and absolve Doze n Dream C4K Centre and its staff or any authorized agents, against any and all claims that may arise from an injury, death, loss, damages, costs or expenses, including legal costs, suffered by me or my son/daughter at any time whilst, enrolled as a student at Doze n Dream C4K Centre.

<u>Declaration of Parents/Guardians:</u> I have read and understood the terms and conditions governing enrolment and undertake to be responsible at all times for the good conduct and behavior of myself and my child and for all the pending fees.

| Signed at | on this day | of | 20 |
|---------------------------------|-------------|----|---------------------------------|
| Signature of Parent / Guardian: | | | |
| Print Name: | | | тм |
| ID number: | | | Endorsed by the ECDL Foundation |