



Address:
 22/2 Catherine Street, Shere
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SILVER STARS | APPLICATION FORM

Application Date		Start Date	
Acceptance Date		Class	

Child's Information

Surname		Home Address	
First Names			
Nickname			
Date of Birth		Daycare program required	Half Day Full Day
ID no		Religion	
Age at start date		Preferred Language	English Afrikaans
Gender			
Nationality			
Allergies			

Details of Parent(s) | Guardian(s)

	Mother	Father
Name(s)		
Surname		
Marital status		
ID number (RSA) / Passport number (Non-RSA)		
Home tel no		
Cell/mobile no		
Email address (main one)		
Postal address		
Residential address		
Occupation		
Company name		
Work address		
Work tel no		
Fax no		

Siblings currently in school

1. Name		Class	
2. Name		Class	

Medical Information

Medical Aid		Med Aid Number	
Doctor's Name		Doctors Tel	
Allergies			
Any other conditions			

Next of Kin

1. Name		Contact No:	
2. Name		Contact No:	

Previous School Care

Name of school			
City		Contact No:	

Any additional information Silver Stars should be aware of

We need the following to accompany this application

- Copy of the inoculation certificate
- Copy of the birth certificate
- Copy of parents' IDs
- Jumbo photo of child for the classroom
- Previous report (if applicable)

Financial Information

1. Registration fee of R600 per family per year
2. A **deposit** equal to one month school fees are payable **with admission**. No deposit will be refunded if you cancel the reserved place of your child. **The deposit is not for the 1st month's school fees** but as provision for the last month when you give notice when your child leaves school
3. School fees: Payable **monthly in advance** over 11 or 12 months **before or on the 3rd** of each month. Use your account number as reference.
4. Silver Stars Management reserves the right to increase school fees in line with the inflation rate on an annual basis.
5. Payment method: Please mark Cash or Electronic Transfer

**Bank details: Shere Pre-School T/A Silver Stars | First National Bank - Cheque Account |
Acc NO: 6212 164 0537 | Branch Code: 252 045**

Signature (parent/guardian)

Date



AGREEMENT

1. I, _____ the undersigned, agree to pay the school fees to Silver Stars Preschool for my child, _____, whom I registered for _____ (half/full) day.
2. I will pay the school fees monthly over 11 months or 12 months in advance on or before the third (3) day of the following month.
3. I agree that I could be penalized in the amount of R50,00 for every payment after the third (3) of each month and which amount will be added to the school fees for the next month.
4. I agree that Silver Stars School reserves the right to suspend my child if fees are not paid by the 10th (The month's fees will remain payable even if the child does not attend school).
5. I agree that I may be penalized for fetching my child after school hours. We ask that parents please adhere strictly to the school hours. If children are picked up after 14h00 for half day or after 17h30 for full day they will be charged a fine of R50 per child. After 17h45 they will be charged a fine of R100 per child. Please pay penalty fees in cash in the office the next morning.
6. I agree that I will give one (1) calendar month notice to the school when removing my child from the school and I agree that I am responsible for the payment of one (1) month's school fees when I did not give the notice as described above.
7. **I agree that the month of November is not regarded as a notice month. Should I give notice in November I agree that I will be liable for the payment of the school fees for the month of December, although the preschool will be close for the December holiday. Should you wish not to pay for December your child will finish at the end of October.**
8. I agree that my child may be taken to a doctor and/or hospital by the personal of Silver Stars School should there be an emergency, and I agree that Silver Stars School will not be held responsible for the account of the particular doctor and /or hospital.
9. I furthermore agree that Silver Stars School, its owner or personnel will not be responsible for the following:
 - 9.1 Injuries pertaining to my child on the school premises, although we will do our best to prevent an incident;
 - 9.2 My child when I left her/him on the school grounds without the supervision of the personnel; and
 - 9.3 Lost clothing and/or other items.
10. Both parties agree that this agreement can only be amended in writing when both parties have reached consensus and signed.
11. I hereby grant Silver Stars Nursery School permission to obtain a credit report on me from a credit bureau.

Signed at Pretoria on this _____ day of _____ 20_____

FULL NAMES: _____

SIGNATURE: _____



Administering of Medication

at Silver Stars Nursery School

I, _____, parent of _____
 in the _____ (class), give my permission that a senior staff member of Silver Stars Nursery School may give my child the following medication if it's necessary and cannot get hold of myself or any contact on my list.

Medication	Yes	No
Antiseptic cream*		
Arnica oil / gel		
Antihistamine*		
Buscopan / generic*		
Panado*		

* Only if we cannot get hold of you by telephone

Complete and send back to the class teacher please.

A CHILD SHOULD NOT ATTEND SCHOOL IF HE/SHE IS ILL OR HAS A TEMPERATURE.

For any other medication or vitamins, you still need to complete the permission medication form in the class. Please note that we cannot give your child any medication if you do not complete and send this letter back to school. Each child must have his / her own completed form. We cannot give homeopathic medicine frequently.

Signed: Date:

Medical Indemnity Form

Parent/Guardian consent form for emergencies

As a parent/guardian I, _____ give consent to have my child, _____ receive first aid by Silver Stars Nursery School and staff and if necessary, be transported to receive emergency care by car or ambulance. I understand that I will be responsible for all charges including medical transport, etc. I give consent for the emergency contact person listed below to act on my behalf until I am available. I agree to review and update this information whenever a change occurs but at least every six months.

Signed: Date:

Contact Number:

CONSENT TO PUBLISH PHOTOGRAPHS

ON THE D6 COMMUNICATOR AND/OR WEBSITE.

Name of Parent/Guardian	Name of Child

Please mark the boxes below:

I consent to the use of photographs of my child in school publications or on the school's D6 communicator.	
I consent to the use of photographs of my child on the schools website.	

I DO NOT consent to the use of photographs of my child in school publications or on the school's D6 communicator.	
I DO NOT consent to the use of photographs of my child on the schools website.	

Signature of Parent / Guardian

Date

SEPARATION ANXIETY IN THE BABY AND TODDLER YEARS

Charmaine Jooste

According to Sarah Abbot, director of Family Counselling Centre in Los Angeles, separation anxiety can strike any child at any given time even as sudden as overnight.

It can also resurface in the toddler-, preschool- and primary school years. It is important to remember that separation anxiety is completely normal and even healthy in a sense.

Fortunately there is a lot a parent can do to relieve the child's feelings of anxiousness. Separation anxiety looks slightly different in various phases and can be dealt with on different ways.

Baby phase (0 to 18 months)

Babies show signs of distress when a parent leaves the room because the parent is no longer physically available. The anxiety is caused by the fact that baby does not know that the parent will return.

What to do?

- A baby needs to be exposed to a variety of caregivers on a regular basis; family, grandparents and friends. This makes the baby accustomed to the fact that different adults can provide in their needs.
- Quick goodbyes keep the tears away. Do not return to the room if baby starts sobbing. The baby will soon realise that the significant 'other' adult will take care of him or her.
- The parent's body language should reassure the baby that the caregiver is trusted.
- An enlarged family photo can also be placed in the cot as a reminder that mum and dad are known to the entrusted caregivers.
- Do not sneak off; your disappearance will make the baby feel uncomfortable. Have an exit plan in place, e.g. say "Goodbye John, see you later;" the caregiver can draw the child's attention away from the parent who then leaves the room.

Toddler phase (18 to 36 months)

Toddlers have a strong sense of attachment to their parents. They know that the parent will return but is afraid to let go. The anxiety can cause tantrums, emotional outbursts, lashing out, kicking, screaming and hysterical crying.

What to do?

- A goodbye routine or ritual can be effective. This can be a secret way that only you and your child have of saying goodbye, e.g. a kiss on each cheek and a high five.
- Give the child a small task by saying e.g. "When I pick you up at school later, you can help me carry the bags from the car into the house." Tasks like these give children a sense of responsibility and convey the message that the parent will come back for them.
- Set a time for your return, e.g. "I will be back just after story time." Make sure however, that you are on time
- Remember that extra one-on-one time between the child and parent relieves feelings of insecurity and it gives the child a feeling of importance.

References:

- C. Jooste (1990), *Separations Anxiety*. University of Johannesburg.
S. Abbot (2001), *Research on Separation Anxiety*. University of Los Angeles.