



P O Box 242  
Greyton  
7233

# GREYTON HOUSE SCHOOL

(Reg No: 13/3/1/153)

Telephone/Fax: 028 254 9260

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[www.greytonhouse.co.za](http://www.greytonhouse.co.za)

## APPLICATION: Greyton House Village School

Grade:

Completion of this form does not guarantee admission to our school

### SECTION A

Date of application:

### DOCUMENTATION REQUIRED

Please be advised that your application will not be considered unless it is submitted with all the information/documentation listed below.

A photocopy of your child's birth certificate	<input type="text"/>	2 x Passport/ID size photographs	<input type="text"/>
A photocopy of your child's latest school report	<input type="text"/>	Motivational letter ( <i>from student Grade 4 to 7</i> )	<input type="text"/>
Medical Aid details ( <i>including any information About medical conditions</i> )	<input type="text"/>	Testimonial ( <i>from current school e.g Principal, HOD, educator</i> )	<input type="text"/>
Fostering/adoption documentation	<input type="text"/>	Proof of vaccinations ( <i>up to Grade 3</i> )	<input type="text"/>

### Person to be contacted once this application has been processed:

Name and surname: (*please specify Mr/Mrs/Miss/Ms/Dr/Revd/ Prof*) .....

Relationship to applicant: (*eg. Maternal grandmother, aunt, sister, mother, father*) .....

Home tel: (.....) ..... Work tel: (.....) ..... Fax: (.....).....

Cell: ..... Email: .....

### CHILD INFORMATION

Surname:  First Name(s) in full:

Preferred name:  Age:

MALE	FEMALE	Date of Birth: <input type="text"/>	Home Language: <input type="text"/>
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**Has a previous application been made to Greyton House on behalf of this child?**

Yes

No

Present School: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Province: \_\_\_\_\_ Postcode: \_\_\_\_\_

Tel: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Name of Principal: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Type of School:

Government Primary  Government Middle School  Independent School

## SECTION B

### PARENTAL/GUARDIAN/CAREGIVER INFORMATION

#### SECTION B(1)

Name of parent(s)/guardian(s)/caregiver(s) with whom the child lives (*please specify Mr/Mr/Ms/Dr/Revd*)

Relationship to child: (*eg. Maternal grandmother, aunt, sister, mother, father*)

Postal Address: \_\_\_\_\_ Province: \_\_\_\_\_

Postcode: \_\_\_\_\_ Physical Address (*where child currently lives*): \_\_\_\_\_

Home Tel: (\_\_\_\_\_) \_\_\_\_\_ Work Tel: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Cell: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Occupation of parents(s)/guardian(s)/caregiver(s) with whom the child lives (*please specify Mr/Mr/Ms/Dr/Revd/Prof*)

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Surname: \_\_\_\_\_ Surname: \_\_\_\_\_

Profession: \_\_\_\_\_ Profession: \_\_\_\_\_

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

**SECTION B(2) – To be completed only if the information is different from the information supplied in B(1)**

Name and Surname of Mother (*please specify Mrs/Ms/Miss/Dr/Revd/Prof*) \_\_\_\_\_

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Postal Address: \_\_\_\_\_ Province: \_\_\_\_\_

Postcode: \_\_\_\_\_

Physical Address: \_\_\_\_\_

\_\_\_\_\_ Province: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Tel:(\_\_\_\_\_) \_\_\_\_\_ Work Tel:(\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Profession: \_\_\_\_\_ Employer: \_\_\_\_\_

**SECTION B(3) – To be completed only if the information is different from the information supplied in B(1)**

Name and Surname of Father (*please specify Mr/Dr/Rev/Prof*) \_\_\_\_\_

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Postal Address: \_\_\_\_\_ Province: \_\_\_\_\_

Postcode: \_\_\_\_\_

Physical Address: \_\_\_\_\_

\_\_\_\_\_ Province: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Tel:(\_\_\_\_\_) \_\_\_\_\_ Work Tel:(\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Profession: \_\_\_\_\_ Employer: \_\_\_\_\_

**SECTION B continued**

**PARENTAL/GUARDIAN/CAREGIVER INFORMATION**

Name of parents as given on child's Birth Certificate:

Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Mother's date of birth: \_\_\_\_\_ Father's date of birth: \_\_\_\_\_

Are the biological parents named above:

Married to each other	Divorced
Single	Separated
Partners (not married)	Widow/Widower

Which parent(s)/guardian has legal responsibility for the child:

Both	Father	Mother
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If the biological parents of the applicant are no longer together, please provide the name, address and telephone number of the parent who is no longer living at home. *(Please note: This MUST be completed as written permission is required for the application. If a parent is deceased, please ignore this section.)*

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Province: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Tel: (\_\_\_\_\_) \_\_\_\_\_ Work Tel: (\_\_\_\_\_) \_\_\_\_\_

Cell: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Is he/she aware of this application and given his/her permission:

YES	NO
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If NO please give reason: \_\_\_\_\_

Does the applicant have a brother or sister currently at Greyton House?

YES	NO
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Grade: \_\_\_\_\_

Please give the total number of children in the family where the child lives (*excluding the applicant*)

Age: \_\_\_\_\_ School: \_\_\_\_\_

MALE

FEMALE

Age: \_\_\_\_\_ School: \_\_\_\_\_

MALE

FEMALE

Age: \_\_\_\_\_ School: \_\_\_\_\_

MALE

FEMALE

### SECTION C

**EXTRA MURAL INTERESTS AND HOBBIES:** (*eg. Sport – rugby, cricket, tennis etc – reading, music – instruments – dance, drama, etc*)

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**ACHIEVEMENTS:** (*Awards, leadership roles, colours, memberships etc.*)

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### SECTION D

**ADDITIONAL INFORMATION:**

Dietary restriction/requirements: \_\_\_\_\_

Allergies: \_\_\_\_\_

Any other information you deem important for the school to know? \_\_\_\_\_

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### SECTION E

**FINANCE:**

Details of person(s) responsible for payments owed to Greyton House for this child:

Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Home Tel: (\_\_\_\_\_) \_\_\_\_\_ Work Tel: (\_\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_ ID Number: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

I understand that Greyton House is an independent fee-paying school and that, in addition to the school fees, there will be other amounts due to Greyton House, such as, but not exclusive to, school uniforms, study materials, outings, extra activities, etc. **Please note that, on acceptance, you will be expected to pay a deposit of the amount set on application. This will be refunded once your child has left Greyton House and all outstanding amounts owing to the school have been settled. Please also note that, prior to full acceptance your child will be required to go through testing (up to Grade 3) or write an entrance test (Grade 4 to 7).**

\_\_\_\_\_  
(Signature of person(s) responsible for all payments)

## SECTION F

### DECLARATION:

The information I/we have given on this form is correct and complete to the best of my/our knowledge and belief. I/we understand that I/we may be asked to produce relevant documents to support the information provided in making this application. I/we would like my/our child to take entrance assessments in the appropriate year of entry. *(This application must be signed by all those who have legal responsibility for the child even if they are living or working abroad.)*

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

Email admissions to [greytonschool@telkomsa.net](mailto:greytonschool@telkomsa.net) or alternatively post to PO Box 242, Greyton, Western Cape 7233