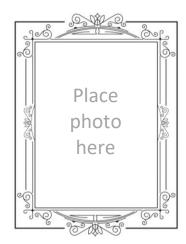


Green Fountain Farm Route 72, Port Alfred Telephone: 046 624 3616 E-mail: info@kingspa.co.za www.kingsedgrp.co.za

PORT ALFRED

Applicant's First Name: ___

APPLICATION FOR ADMISSION 2026



Applicant's	Surname:	
	Into Grade	for 2026
Contact pa	rent/guardian full name:	
Contact Nu	mber Cell:	
Contact Nu	mber Work:	
Contact En	ail Address:	
You will be informed be Please only pay the R	n form does not guarantee acceptance into y telephone call or email after relevant int 400 Application/Booking fee at the mome ions Officer for any queries: info@kingspa	terviews have taken place. nt and not any other fees until notified.
	TED FOR	
OFFICE USE ONLY: ACCEP		

Please note that incomplete forms will not be considered. Please complete the following form and ensure that all the paperwork is attached in order to facilitate your application. Thank you.

ENROLEMENT PAPERWORK CHECKLIST:

		YOUR CHECKLIST	OFFICE USE ONLY
1	The fully completed enrolment form		
2	2x recent ID photos of the learner. Paste one of the photos on the cover page.		
3	The learner's most recent report		
4	A transfer card from the learner's current school		
5	Completed, signed and stamped Confidential Reference from current school		
6	A copy of the learner's immunization card (not optional)		
7	A copy of the learner's unabridged birth certificate		
8	Copy of BOTH parent's/guardian's ID's (Even if separated/divorced/unmarried)		
	OR, copy of death certificate if parent is deceased.		
9	If available, a copy of the medical-Aid Card		
10	Most up-to-date school-fee statement from current school		
11	If applicable, Court documentation indicating guardianship/foster placement		
12	Proof of income, not older than three months		
	 If employed, a certified copy of both parents pay slips/bank statements 		
	 If self-employed, the last three month's bank statements. 		
	 If the learner is sponsored, proof of income for the sponsor – either bank 		
	statements or salary slips		
13	The completed, initialed and signed Contract: Undertaking by Parents/Guardians		
14	The completed and signed PAYMENT OF SCHOOL FEES Form		
15	The signed SCHOOL FEE STRUCTURE 2026 Form		
16	The completed and signed AGREEMENT OF TUITION Form		
17	The completed and signed DEBIT ORDER Form		
18	The CONSENT AND INDEMNITY form		
19	The completed POPI ACT CONSENT, WHATSAPP GROUP and IMAGE RELEASE Form		
20	The signed STATEMENT OF FAITH		
21	The Initialed and signed CODE OF CONDUCT AND DISCIPLINARY POLICY		
22	Foreign Nationals: Copies of work permits, study permits and Passports		
23	R400 Application/Booking fee		

Enrolment Procedure

- **Step 1:** Submit the fully completed Application Pack, together with the required documents and R400 Application/Booking Fee.
- **Step 2:** You will be invited to an interview and your child may/may not be required to write a Diagnostic test.
- **Step 3:** You will be interviewed by the principal of The King's School Port Alfred.
- **Step 4:** You will receive a call stating whether your application is successful or not.
- **Step 4:** You will be required to collect the Parent Pack from the school and pay the R3 000 non-refundable registration fee within 30 days of acceptance.
- Step 5: The learner may attend The King's School Port Alfred on the agreed date if all criteria are met.

After the applicant has been accepted, the following documents, which are also available to view on The King's School website (www.kingspa.co.za), are to be issued to parents:

OFFICE USE ONLY: Parents sign on receipt of documents

		Parent Signature
1	Vision, Mission and Values	
2	Philosophy of Education	
3	Statement of Family Values	
4	Gender Policy	

Office Use Only STUDENT NUMI						SP	ORT	НΟ	JSE							
	•										•					
PERSONAL DETA	AILS OF	THE	APPLI	CA	NT (TH	E LE	ARN	ER)								
Year applied for			Grade	apı	olied for				G	rade a	accep	oted f	or			
Date of application			Highe	st G	rade					ear th	at th	e Gra	de			
Date of application			Passe							vas pa		c Gra	uc			
Has the learner			Which	n Gr	ade?				V	Vhich	yearî	?				
repeated a grade?																
SURNAME (AS PER BI	DTU CEDTIEI	CATE)														
FIRST NAME (ONLY)	KIII CEKIIFI	CATL														
2 ND /OTHER NAME	S															
PREFERRED NAME																
DATE OF BIRTH				G	SENDER			М	ale				Fe	male		
RACE	Asian/II	ndian		C	Coloured			Blo	ick				W	hite		
HOME LANGUAGE				١	IATIONA	LITY										
CITIZENSHIP	SA Citiz	en		li	mmigran	t		Ye	ar of i	mmi	grati	ion				
ID/PASSPORT NUMBER																
NOWBER					l l					1						
HOME ADDRESS																
(of learner)																
											СО	DE				
THE LEARNER LIVE	S WITH	Both	paren	ts	Fath	ner		Мо	ther	G	rand	lpare	nts	Other.	Specify	
HOME TEL. NUMBI	FD						FΔRN	IFR C	ELL NO)·						
EMERGENCY NUM							ELATI			<i>.</i>						
(Parent/Guardian)	DEIX								CONT	ACT						
EMERGENCY NAM	E						MERG		Υ							
1545N55 5144U 45	200566					S	URN/	AME								
LEARNER EMAIL AL	DDRESS															
NAME OF BREWOOD	16.66110.6															
NAME OF PREVIOU)L					DD/	OV/INI	CE /C	OLINI	FDV					
CONTACT NUMBER DEXTERITY	Υ	D	iaht ha	an d	od.		Left I		CE/C	OUN	IKY	100	hida	vtrous	(hoth)	
MODE OF TRANSPO	∩PT		Right handed Taxi				Car	Turiu	eu 	Sch	nool		Jiue.	xtrous Oth		
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IF PARENTS ARE DE	CEASED		Bot	h P	arents			M	other					Father		
RELIGION							CHUI				<u> </u>					
						I_										
NUMBER OF CHILD	REN IN T	HE FA	MILY													
		THE		//⊏	a firstb		and a	rd -	\							
POSITION OF APPL	<u>ICA</u> NT IN	IHE F	AIVIILY	<u>(</u> E.	.g. mstb	<u>orn,</u> .	<u>2''º,</u> 3	<u>''',</u> e	tc.)							

LEARNER DETAILS COI	NTINUED
MEDICAL AID NAME	MEDICAL AID NUMBER
MAIN MEMBER	MAIN MEMBER ID No.
DOCTOR'S NAME	DOCTOR'S TEL NUMBER
CLINIC NAME	ACCOUNT REF. No.
ALLERGIES	
MEDICAL CONDITIONS	
E.g.: Diabetes, Epilepsy etc.	
BARRIERS TO	
LEARNING E.g. ADHD	

.....

DETAILS OF PARENT/S OR GUARDIAN/S																
PARENT/GUARDIAN	1															
SURNAME						TITL	E E.g. N	1r/Mi	rs/Rev	v/Dr						
FIRST NAME						GEN	IDER					Male	2		Fem	ale
ID/PASSPORT No.																
NATIONALITY						RAC	E									
HOME LANGUAGE						RELA	TIONSH	IP TC) LEA	RNER						
LEARNER RESIDES W	ITH THIS	S PAREN		Υ	N											
MARITAL STATUS	Single		Married to Sepail other parent			ated Divorced Widow					wed	ved Living together			Remarried	
HOME TEL No.						CEL	L NUN	1BE	R							
WORK TEL						ALT	ERNAT	IVE								
NUMBER						NUI	MBER									
EMAIL ADDRESS																
RESIDENTIAL																
ADDRESS																
												COD	E			
POSTAL																
ADDRESS																
												COD	E			
OCCUPATION							EMPLO	DYE	R		•					

PLEASE TURN OVER

DETAILS OF PARENT,	/S OR GL	IARDIA	N/S										
PARENT/GUARDIAN	2												
SURNAME						TITLE	E.g. Mr/M	rs/Rev/Dr					
FIRST NAME						GEND	ER			Male		Fem	ale
ID/PASSPORT No.									•				
NATIONALITY		•				RACE	· ·				•		· P
HOME LANGUAGE						RELATIO	ONSHIP TO	LEARN	R				
LEARNER RESIDES W	ITH THIS	PAREN	IT	Υ	N				'				
MARITAL STATUS	Single		rried to er pare		Separa		Divorced		idowed		iving gether	Rem	arried
HOME TEL No.						CELL	NUMBE	R					
WORK TEL No.						ALTEF NUM	RNATIVE BER						
EMAIL ADDRESS													
RESIDENTIAL													
ADDRESS													
										CODE			
POSTAL													
ADDRESS													
										CODE			
OCCUPATION						EN	ЛРLОYЕ	R					
IF PARENT/GUARDIA	N IS REI	//ARRII	ED, FI	LL IN	N THE	STEPPA	RENTS	DETA	ILS				
STEPPARENT 1 (mar	ried to p	arent/g	guard	ian :	1)								
SURNAME						TITLE	E.g. Mr/M	rs/Rev/Dr					
FIRST NAME						GEND	ER			Male		Fem	ale
ID/PASSPORT No.													
HOME TEL No.	•					CELL	NUMBE	R					
WORK TEL No.						ALTER	RNATIVE						
						NUM	BER						
EMAIL ADDRESS						NUM	BER						
EMAIL ADDRESS						NUM	BER						
STEPPARENT 2 (marr	ried to pa	arent/{	guard	lian :	2)	NUM	BER						
	ried to p	arent/{	guard	lian :	2)		BER E.g. Mr/M	rs/Rev/Dr					
STEPPARENT 2 (mar	ried to p	arent/{	guard	lian :	2)		E.g. Mr/M	rs/Rev/Dr		Male		Fem	ale
STEPPARENT 2 (mar	ried to p	arent/{	guard	ian :	2)	TITLE	E.g. Mr/M	rs/Rev/Dr		Male		Fem	ale
STEPPARENT 2 (marrisder) SURNAME FIRST NAME	ried to p	arent/{	guard	lian :	2)	TITLE	E.g. Mr/M			Male		Fem	ale
STEPPARENT 2 (marr SURNAME FIRST NAME ID/PASSPORT No.	ried to p	arent/g	guard	lian :	2)	TITLE GEND CELL	E.g. Mr/M. DER	R		Male		Fem	ale
STEPPARENT 2 (marr SURNAME FIRST NAME ID/PASSPORT No. HOME TEL No.	ried to p	arent/g	guard	lian :	2)	TITLE GEND CELL	E.g. Mr/M. DER NUMBE	R		Male		Fem	ale

PARENTAL/GUARDIAN CONTRACT

I/We, the parents/guardians of (Learner)_______agree to the following:

1. GENERAL:

- 1.1. I declare that all the particulars furnished by me on this form are true and correct. I hereby give The King's School Port Alfred the authority to verify any and all information supplied on this application and understand that in the event of incorrect or fraudulent information or documents provided, the application process will be immediately cancelled and no further possibility of application will be made available to me.
- 1.2. I understand that this application form does not entitle the applicant to a place in The King's School Port Alfred. I hereby certify that I am the legal parent/s of the learner or that I have legal custody and/or guardianship in respect of the above named learner.
- 1.3. I understand that the Principal and or any other duly authorized person will act in *Loco Parentis*, this includes consent for medical treatment in case of an emergency once all reasonable efforts have been made to contact the learner's parents/guardians.
- 1.4. I understand that while every reasonable effort will be made to prevent losses or damage to the learner's clothing and equipment, The King's School Port Alfred cannot be held liable for such.
- 1.5. I undertake to give, in writing, one month's intention to remove the learner from The King's School Port Alfred, failing this one month's fees will be charged pay fees in lieu thereof.
- 1.6. I undertake to return any books and/or equipment belonging to The King's School Port Alfred or pay the replacement value of them.
- 1.7. I will inform The King's School Port Alfred of any changes to personal information/contact details in writing.
- 1.8. I acknowledge the authority of the Principal, the teachers, staff and student leaders.
- 1.9. I agree to ensure that the learner attends school regularly and should he/she be absent from school for any reason, inform the school of that in writing.
- 1.10. I commit to working in partnership with the school. I will be involved in the school by attending functions, parent's meetings, sports events and fun events.
- 1.11. I will support all aspects of the learner's education by supervising homework to ensure that it is neat and completed. I will check and sign the child's homework diary each day and ensure that revision and learning take place at home. In the event of my child experiencing a barrier to learning, I will follow the advice of the educators in regards to assessments and assistance needed for the learner.
- 1.12. I understand that the learner will be taught the Word of God as part of the curriculum and I undertake to support The King's School Port Alfred in all its Christian Principles.
- 1.13. Realising that my/our attitude towards teachers and policies of The King's School Port Alfred affect the emotional and academic stability of the child, I/we will support and uphold the ideals of The Kings School Port Alfred in every way and will abide by its discipline and regulations. At no time will I/we participate in destructive criticism of staff or The King's School Port Alfred to the child or to others, but instead, if a problem arises, will go directly to the teacher or Principal in a Christian manner as indicated in Matthew 18:15 & 16.
- 1.14. I have read the School Rules and the Code of Conduct attached and undertake to encourage the learner to adhere to these. (*Proverbs 29:17 Discipline your son and he will give you peace, he will bring delight to your soul.*)
- 1.15. I agree to sign all relevant consent forms that allow my personal information to be shared with entities that relate to the collection of outstanding fees and general educational practices.
- 1.16. I understand that smoking in school uniform and the abuse of any drug and/or alcohol is an infringement of school rules and will not, under any circumstances, be tolerated.

Initials of all signatories:

2. FINANCES:

- 2.1 I understand that both parents are jointly and severally liable for the payment of school fees. (Both parents are liable for fees.)
- 2.2 This is a fee-paying school and I/we jointly undertake to pay school fees according to this contract and understand the following:
 - 2.2.1 Payment of annual school fees is compulsory in either eleven installments, per term in advance or paid fully per annum in advance.
 - 2.2.2 Learner's accounts that run overdue for 37 days will be suspended from school until the outstanding fees are paid in full. Full school fees will still be charged during suspension.
 - 2.2.3 Learners whose accounts run overdue for 60 days will be required to find alternate education.
 - 2.2.4 In the event of no payment of school fees, The King's School Port Alfred may initiate legal action against both parents irrespective of maintenance and court orders which may or may not exist between the parties. The parents will be responsible to pay all administrative or collection fees over and above school fees.
 - 2.2.5 I am responsible for all bank charges, legal fees and interest on any outstanding fees.
 - 2.2.6 I undertake to reimburse The King's School Port Alfred for any damage to school property that may be caused by the learner if the damage is caused willfully or through disobedience.

3. CANCELLATION OF CONTRACT

I understand that the contract may be cancelled by The King's School Port Alfred for any reason including, but not limited to:

- 3.1 Non-payment of school fees (No negotiations will be entered into)
- 3.2 Bad behaviour of the learner as per the Code of Conduct
- 3.3 Bad behaviour of the parents (vandalism, riots, intimidation etc.)

Fair process will be followed in this instance and parents will be informed of the reasons of the termination of the contract and be given opportunity to plead their case in either writing or at a

The terms of cancellation will depend on the nature of the infringement.

NO CHILD WILL BE ACCEPTED IN THE KING'S SCHOOL PORT ALFRED UNLESS THIS CONTRACT HAS BEEN SIGNED BY PARENTS AND WITNESSES.

THE PARENT/LEGAL GUARDIAN DECLARES THAT HE/SHE IS THE LEGAL PARENT/GUARDIAN OF THE CHILD AND IS ENTITLED TO SIGN THIS DOCUMENT AND SHALL BE BOUND HERETO BOTH AS PARENT/GUARDIAN, AND IN HIS/HER PERSONAL CAPACITY.

Signed on thisday of	at
Witnesses MUST sign.	
Name of Mother/female guardian:	Signature:
Name of Father/male guardian:	Signature:
Name of witness 1:	Signature:

PAYMENT OF SCHOOL FEES														
Learner First Name and surname: Student Number:														
Payment Method(tick):	Annua	al Payme	ent in ac	dvance			Mor	ithly Pa	yment ii	n advan	ce			
DETAILS OF THE PERSON RESPONSIBLE FOR THE SCHOOL FEES														
SURNAME: Title: (e.g. Mrs/Mr/Dr/Rev)														
FIRST NAMES:														
IDENTITY NUMBER:														
Telephone Numbers:	Home Cell:	Home: Work: Cell: Fax:												
Email Address	CCII.						Tux.							
Residential Address:														
Postal Address:									Postal	Code:				
Postal Address:									Postal	Code:				
Occupation:							Fmn	loyer:	rostai	coue.				
Employer Tel:								10 7 61 1						
 It is hereby agreed that I/we the Guardians/Parents of the Learner shall be liable jointly and severally (meaning both parents) for the payment of the School Fees and additional charges as per the terms of The King's School Port Alfred. It is hereby acknowledged that one month's written notice is required for any learner being removed from The King's School Port Alfred. Should the notice not be given, I/we will be responsible for the payment of the forthcoming month's fees in lieu of such notice. As per the contract I/we understand that should any legal action be taken to recover outstanding school fees, I/we will be held responsible to pay these legal fees. I/we furthermore understand that my/our child/ren will be suspended from The King's School Port Alfred, while being charged full school fees, until such outstanding fees are paid. I/we agree to pay interest on outstanding amounts as well as a nominal administration fee set by The Kings School Port Alfred to cover the cost of additional paperwork and calls that The King's School Port Alfred may have to make to secure overdue payments. The King's School Port Alfred will not accept cheques. 									ed. ng's f e eing					
Signed on this	day	of				a [.]	t							
• It is essential to	o have	the wit	nesses	sign th	is docı	ument.								
Name of Mother:						Signature:								
Name of Father:						Signature:								
If person other than p	parents	s is res	ponsib	le for f	ees:	Name:								
						Signat	ure:							
Name of witness 1:						Signat	ure:							
Name of witness 2:						Signat	ure:							
		ln:	formatio	on checl	ked by	school re	presei	ntative:						

CONSENT AND INDEMNITY FORM	
Full name of learner:	
 I hereby give consent for my child: a) To take part in school trips and other activities that may take plate b) To be given first aid or urgent medical treatment during any school staff member to act "in loco parentis" – in place of the parents. c) Participate in sport activities and other academic related activities If you are not in agreement with this, please furnish relevant information 	ool trip or activity, allowing a
 Please note the following important information before signing this formation. a) The trips and activities covered by this consent/indemnity include. Any activities on regular any school day. All visits by learners to offsite property which can take place of school, holidays or weekends. Adventure activities at any time. Offsite sporting fixtures. b) The school will send you information about each trip before it take. You may, if you wish, tell the school that you do not want your of particular school trip. (School trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees to the school trips may only be attended if fees the school trips may only be attended if fees the school trips may only be attended if fees the school trips may only be attended if fees the school trips may only be attended if fees the school trips may only be attended if fees the school trips may only be attended if fees the school trips may only be attended if fees the school trips may only be attended if fees the school trips may only be attended if the	le during school hours, after kes place. hild to participate in any
DECLARATION: I agree to my child receiving medication as instructed and any emergence treatment, including anesthetic or blood transfusion, as considered nece authorities present. I agree that all of these treatments will be for my personal cannot be held responsible to cover costs incurred.	essary by the medical ersonal account and that the
INDEMNITY: I hereby indemnify, hold harmless and absolve the staff, other members accompanying parents and the Governing Body of The King's School Porclaims that may arise in connection with the loss of or damage to the prochild/ward in the course of activities during school hours and on any tripactivities on the trip, in the knowledge that the trip manager will endeat the safety and welfare of my child/ward.	rt Alfred against any or all coperty of or injury to my os or during the course of
I have read, understood and agree to the above.	
Parent/Guardian 1 signature:	Date:
Parent/Guardian 2 signature:	
Witness name: Witness signature:	

POPI ACT CONSENT FORM Learner's full name: ____ Under the POPI Act, I am obligated to inform you with whom we share your and your child's personal information. The personal information that we collect is used specifically for school purposes. The following persons or entities are involved in the collection or processing or use of your information: The administration staff who collect the data and capture it on our various data-bases to create class lists, contact sheets, report cards and various other school related requirements. The teachers and principal have access to information for the same reasons as well as for educational SAGE – Our accounting system, this is also viewed by a third party to ensure that all our practices are credible. SASAMS – Our Data Base where we capture all the information required. This information is shared with the Department of Education The Department of Education has access to personal information and academic information of learners NAISA - Have access to information, but only as anonymous surveys, they are not privy to personal information. ACSI – This is our Covering Body. They have access to minimal learner information, but mostly also in survey form. Specialist, Like Occupational Therapists, Audiologists, etc. – They have access to information once you, as a parent, have granted permission for us to pass this information on. Debt Collectors and Lawyers – Your information will be handed to them to enable us to collect outstanding fees. Doctor/Hospital/Medical Personnel – Relevant information in case of an emergency. Other Schools – To hand over portfolios and profiles in the event of transfer to another school. We also give information to other schools who request references from schools before enrolling their children. UMALUSI – The matric examination body to enable the printing of reports. Auditors – Have access to some personal information for auditing processes. SACCSA – Our sports association where we give specific information about specific learners if required. SGB – Relevant information is required by the SGB to enable it to make decisions for the future benefit of the school. Various events at school – e.g.: Eisteddfod, Art competitions may require names, ages and contact numbers.

 Newspapers, Facebook and the TKSPA Webpage – For marketing, and of course, to brag about your beautiful children.

WhatsApp Groups – Telephone numbers are easily accessible on the various groups.

The school cannot function without sharing appropriate and relevant information with each of the above.

Sign your consent for the sharing of inform	nation:	
Parent/Guardian 1 signature:	Date:	
Parent/Guardian 2 signature:	Date:	
Witness name:	Witness signature:	

WHATSAPP GROUPS

WhatsApp groups need special permission and understanding:

- We use WhatsApp groups for fast, efficient communication with parents and learners.
- Your permission is required to be on the groups.
- By signing this, you give permission to the school to add your name to any relevant class, sport, tour or information group that will benefit you and your child. Specific groups will be deleted after they have served their purposes.
- By signing this, you also agree not to share any parent's numbers with any third party unless you have obtained permission from that person to share their number.
- You also agree not to use any of the numbers for marketing purposes other than The King's School Port Alfred marketing.

WhatsApp number:		
Parent/Guardian 1 signature:		Date:
Parent/Guardian 2 signature:		Date:
Witness name:	Witness signature: _	
IMAGE RELEASE		
authority to execute this releasing irrevocable permission to publicareer at the aforementioned sincluding events both on and of these images may be published advertisements, periodicals, called harmless any photographer and the second seco	f	ing's School Port Alfred ration of his/her scholastic I and unofficial school events, t not limited to ases. Furthermore, I will hold is, from any liability by virtue
Parent/Guardian 1		
Name:	Signature:	
Date:		
Parent/Guardian 2		
Name:	Signature:	
Date:		
Witness		
Name:	Signature:	
Date:		

STATEMENT OF FAITH

What we Believe:

BIBLE

We believe in the Scriptures of the Old and New Testaments in their original writing as fully inspired of God and accept them as the supreme and final authority for faith, life and the governance of this School.

GOD

We believe in one God, eternally existing in three Persons - Father, Son and Holy Spirit. We believe that in terms of the first commandment (Exodus 20:1-6) God alone is to be worshipped to the exclusion of all other gods or idols (1 Tim 2:5). We believe that the only way to fellowship with God is through His Son, Jesus Christ.

JESUS CHRIST

We believe that Jesus Christ was begotten of the Father, conceived by the Holy Spirit, born of the Virgin Mary and is true God and true man.

MAN, SIN & DEATH

We believe that God created male and female as two distinct, immutable and specific biological genders that together reflect the image and nature of God (Gen 1:26-28). We believe that God created man (male and female) in His own image; that man sinned and thereby incurred the penalty of sin which is death, physical and spiritual; that all human beings inherit a sinful nature which issues (in the cases of those who reach moral responsibility) in actual transgression involving personal guilt.

FORGIVENESS

We believe that the Lord Jesus Christ died for our sins as a substitutionary sacrifice according to the Scriptures and that all who believe in Him are justified on the grounds of His shed blood.

NEW LIFE

We believe in the bodily resurrection of the Lord Jesus, His Ascension into Heaven, and His present life as our High Priest and Advocate.

VICTORIOUS RETURN

We believe in the personal bodily return of the Lord Jesus Christ.

SALVATION

We believe that all who repent of their sin and receive the Lord Jesus Christ by faith are bornagain of the Holy Spirit and thereby become children of God.

HOLY SPIRIT

We believe in the baptism in the Holy Spirit, empowering and equipping believers for service, with the accompanying supernatural gifts of the Holy Spirit; and in fellowship with the Holy Spirit.

MINISTRY

We believe in the divinely ordained ministries of Apostle, Prophet, Evangelist, Pastor and Teacher.

FOREVER...

We believe in the resurrection of both the just and the unjust, the eternal blessedness of the redeemed and the eternal banishment of those who have rejected the offer of salvation.

MARRIAGE

We believe in and subscribe to the Biblical principle of heterosexual relationships between one natural man and one natural woman and that this is the only marriage relationship that constitutes holy matrimony. Any sexual relationship outside this definition of marriage is sin.

ELDERS

We believe that elders carry the responsibility for oversight and care of the members. Where necessary, elders must carry out biblical discipline for the protection of the local Church.

CHURCH

We believe that the one true Church is the whole company of those who have been redeemed by Jesus Christ and regenerated by the Holy Spirit, that the local church on earth should take its character from this conception of the Church and therefore that the new birth and personal confession of Christ are essentials of Church membership.

BAPTISM AND COMMUNION

We believe that the Lord Jesus Christ appointed two ordinances - Baptism in water and the Lord's Supper - to be observed as acts of obedience and as perpetual witnesses to the cardinal facts of the Christian faith; that Baptism is the immersion of the believer in water as a confession of identification with Christ in burial and resurrection and that the Lord's Supper is the partaking of the emblems symbolic of the Saviour's broken body and shed blood, in remembrance of His sacrificial death, 'till He comes.

HEALING

We believe that divine healing was provided for in the Old Testament and is an integral part of the Gospel.

HOLINESS

We believe the Bible teaches that without holiness no man can see the Lord.

CHRIST-LIKENESS

We believe in the doctrine of sanctification as a definite, yet progressive work of grace, commencing at the time of the new birth and continuing until the consummation of salvation.

REVELATION

The Church is open to any further truth, which the Holy Spirit may illuminate from the Scriptures.

PERSONAL AFFIRMATION

Dayant/Cuardian 1

As I join The King's School Port Alfred, I confirm that I have read and understood this Statement of Faith and agree to my child learning about all the above points.

Parent/Guardian 1		
Name:	Signature:	_
Date:		
Parent/Guardian 2		
Name:	Signature:	_
Date:		

THE KING'S SCHOOL PORT ALFRED

(AN ASSOCIATION INCORPORATED UNDER SECTION 21 OF ACT NO 61 OF 1973)

AGREEMENT OF TUITION

Made and entered into by and between:
THE KING'S SCHOOL PORT ALFRED

(AN ASSOCIATION INCORPORATED UNDER SECTION 21 OF ACT NO 61 OF 1973)

(hereinafter referred to as "the School")

And

	(BOTH PARENTS/GUARDIANS)
(full names and surname), (jointly referred to as "the Parent") For the tuition and education of	,
(full names and surname), (jointly referred to as "the Pupil")	(ONE PER CHILD)
WHEREAS:1. the Parent is desirous of having the Pupil admitted to the School;	
2 the Pupil has been admitted to the School with effect from	·and

NOW THEREFORE THE PARTIES AGREE AS FOLLOWS:

SCHOOL FEES

1.1 *The annual fees due to the school shall be divided equally and paid by the Parent in eleven (11) monthly amounts, from January up to and including November, and pro-rata thereof where a pupil begins mid-year.

the parties are desirous of recording the terms and conditions on which the Pupil will be educated and trained by the

- 1.2 *The monthly amounts, together with such other incidental costs such as may arise will be payable in advance, by the Parent to the School, **on or before the 2nd day of each and every month**.
- 1.3 *There shall be no entitlement to any rebate of fees if the pupil is absent for any portion of a term owing to illness or any other cause.
- 1.4 *In the event of the parent failing to pay the school fees on the due date thereof, interest at the prime overdraft rate per annum compounded monthly shall be payable on school fees which are in arrears until date of payment of the full outstanding amount.
- 1.5 *The Board of Directors of the School shall have the right to amend the school fees referred to in paragraph 1.1 above.
- 1.6 *In the event of the Parent failing to pay school fees legal action may become necessary to procure payment, the Parent shall then become liable for payment of the School's legal costs on the scale as between attorney and own client.
- 1.7 *In the event of the Parent failing to pay school fees the School shall be entitled to exclude the Pupil and/or terminate this contract, after due administrative process.
- 1.8 *The Parent agrees to pay the school fees by way of monthly bank debit order.
- 1.9 The parent consents to the school accessing their consumer profile on a national database prior to admission.

2. DURATION OF AGREEMENT

- 2.2 The Parent shall be entitled to cancel this agreement with at least three (3) calendar month's prior

written notice to the School. If such notice is not given, a full term's fees, at the rate applicable for the next term in which the pupil would have been, shall be paid by the Parent. Subject to paragraphs 1.7 and 2.3, if the School elects for any reason to terminate this agreement, then it may do so on giving the Parent a clear three (3) months written notice of its decision to terminate this agreement.

2.3 *The Principal may require a Parent to withdraw a pupil with immediate effect in cases of serious or repeated misconduct, or where, in his or her opinion, it is in the interest of the School or Pupil or both.

IGNED:	(FATHER)	(MOTHER)
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3. TUITION OF PUPIL

3.1 The school shall provide tuition to the Pupil in accordance with the curriculum and syllabus set out by the School.

4. UNDERTAKINGS BY PARENT

The Parent undertakes:

- 4.1 to ensure that the Pupil is at school on time each day;
- 4.2 to ensure that the Pupil complies with the school uniform requirements, that his/her appearance is neat and in compliance with the guidelines set down;
- 4.3 *to abide by the School's policy, discipline and Student's Code of Conduct;
- 4.4 *to keep open lines of communication with the School and staff;
- 4.5 *generally, to do all the Parent can to ensure that the Parent's association with the School is a healthy and happy one.

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- 4.6 Unless you instruct the School expressly and in writing to the contrary, your consent is given for the School to:
 - i. collect, store and process information about you and any Third Party or divorced or separated Parent responsible for payment of any or all amounts owing in school fees
 - ii. collect, store and process names, contact details and information relating to yourself and your Child, and to such information being made available to other parents/guardians, staff or responsible persons engaged or authorised by the School for School-related purposes to the extent required for the purpose of managing relationships between the School, parents/guardians, and current learners as well as providing references and communicating with the body of former learners;
 - iii. include <u>photographs</u>, with or without name, of your Child in School publications, or in press releases to celebrate the School's or your Child's activities, achievements or successes;
 - iv. supply information and a reference in respect of your Child to any educational institution which you propose your Child may attend. We will take care to ensure that all information that is supplied relating to your Child is accurate and any opinion given on his/her ability, aptitude and character is fair. However, the School cannot be liable for any loss you or your Child is alleged to have suffered resulting from opinions reasonably given, or correct statements of fact contained, in any reference or report given by us; and
- 4.7 The School may not distribute or otherwise publish any of your personal information in its possession, unless you give your consent, in writing, to the School that it may do so. Should this be the case, the School may only distribute or otherwise publish the information specified in your consent to the people and for the purpose stated in your written consent

5. DISCIPLINARY MATTERS

- 5.1 *All disciplinary matters pertaining to the care, education and training of the Pupil in all its facets shall vest in the Principal of the School or in a person authorised thereto by the Principal.
- 5.2 *Control, expulsion, suspension and discipline of the Pupil shall be in accordance with the constitution of the school and/or rules and regulations set by the Board of the School as well as legislation set by National and Provincial Government.

6. **INDEMNIFICATION**

- 6.1 *The Parent indemnifies the School, its employees and officials against any injury, harm or other loss caused to any person, as a result of the conduct of the Pupil.
- 6.2 *The Parent exempts the school, its employees and officials from liabilities incurred on account of any injuries to, or illness of the Pupil and agrees and consents that the School or any of its teachers may consent to any operation or medical treatment of the Pupil, should such consent be required for medical reasons on an urgent basis and should it not be possible for the Parent to be contacted immediately.

6.3 *The Parent agrees that the above indemnity shall apply to all activities on the school or Aftercare premises, as well as on pre-arranged school trips.

7. BREACH

- 7.1 *The Parent shall be deemed to be in breach of this agreement in the event of failure by the Parent to comply with the terms stated in this agreement and after the Parent has failed to remedy such breach, within seven (7) days after a written notice of breach has been dispatched by the School to the Parent at the Parent's chosen email address recorded berein
- 7.2 *A certificate signed by the Principal of the School as to any amount owing by the Parent to the School or as to any other fact arising out of this agreement shall be *prima facie* proof of all facts stated in the certificate and it will not be necessary to prove the appointment or authority of the Principal who signs such certificate. Such certificate shall be a liquid document for the purposes of provisional sentence or summary judgement proceedings against the Parent.

8. **GENERAL**

- 8.1 No alteration, cancellation, variation or addition hereto shall be of any force or effect unless reduced to writing and signed by the parties to this agreement or their duly authorised representatives.
- 8.2 The Parent hereby chooses the email address for all purposes whatsoever at the address set forth below, and the Parent shall be entitled by written notice to the School to change his chosen email address, provided that the change shall only become effective seven (7) days after service on the School of the said notice.
- 8.3 The King's School Port Alfred's biblical role is to work in conjunction with the home to mould students to be Christ-like. We therefore strongly believe in the biblical value of family and marriage. The King's School believes that marriage is limited to a covenant relationship between a man and a woman. On occasion, the atmosphere or conduct within a particular home may be counter or in opposition to the biblical lifestyle the school teaches. This includes, but is not necessarily limited to, sexual immorality, cohabitation out of wedlock, homosexual sexual orientation, or inability to support the moral principles of the school (Romans 1:21-27; 1 Corinthians 6:9-20).
- 8.4 In such cases, the school reserves the right, within its sole discretion, to refuse admission of an applicant or to discontinue enrollment of a student.
- 8.5 The signatories to this agreement will be jointly and severally in <u>solidum</u> liable to the School for the due performance of all the Parent's obligations in terms hereof.

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- 8.6 The signatories to this agreement agree that any disputes that may arise, shall be referred to arbitration to ensure a mutually amicable resolution.
- 8.7 In addition to the above terms and conditions, the parent acknowledges that the school documents below have been read and understood; and the parent consents to their implementation by the school: Statement of Faith; Gender Policy

10. CONSENT

I/We consent that the School collect, store and update personal information of me/us and the student.

I/We consent that the School may provide the information to an authorized representative for a lawful purpose only.

I/We give consent that the information provided be confirmed and updated where necessary by the School or the Schools authorized representative

Parents residential address:	
Postal address:	
THUS DONE AND SIGNED BY THE PARENT/S AT	
ON THE (DATE) IN THE	E PRESENCE OF THE UNDERSIGNED WITNESS:
(PARENT)	(PARENT)
(I.D. NUMBER)	(I.D. NUMBER)
(AS WITNESS)	(AS WITNESS)
THUS DONE AND SIGNED BY THE SCHOOL AT PORT ALFRED C	ON THE(DATE)
IN TH	HE PRESENCE OF THE UNDERSIGNED WITNESS
PRING	CIPAL OF THE SCHOOL (DULY AUTHORISED THERETO)
AS W	VITNESS

DEBIT ORDER FORM (one per family)

(Compulsory: Must be completed)

	From: (Name of Debtor)
To: The King's School Port Alfred	Date:
Dear Sirs,	
My Agreement dated:	
The details of my/our bank a	ccount are as follows:
BANK BRANCH NAME AND TOWN	
BRANCH NUMBER	
ACCOUNT NUMBER	
TYPE OF ACCOUNT (Delete where not applicable)	CURRENT (CHEQUE) / SAVINGS / TRANSMISSION
	d authorise you to draw against my/our account with the above or branch) to which I/we may transfer my/our account) the sum of
necessary for payment of the magreement" on the 2 nd day of each be increased as and when the monor public holiday, the debit order wi	(and amount in words), "the amount nonthly school fees due in respect of the above-mentioned month commencing on, which amount can thly school fees are increased. Should the 2 nd fall over a week-end II operate on the day prior to such week-end or public holiday. All account by you shall be treated as though they had been signed
I/We understand that the withdrawc	als hereby authorised will be processed electronically.
I/We agree to pay any bank charge	es relating to this debit order instruction.
	me/us by giving you 30 (thirty) days' notice in writing, but I/we ntitled to any refund of amounts which you have withdrawn while ounts were legally owing to you.
Receipt of this instruction by you sha	ll be regarded as receipt thereof by my/our bank.
SIGNED AT	ON THIS DAY OF
SIGNATURE AS USED FOR SIGNING CI	HEQUES
WITNESS	WITNESS
NOTE: A cancelled cheque should	be attached for bank identification purposes (Current accounts

only). The user may add to the above minimum requirements for incidental costs.



Green Fountain Farm Route 72, Port Alfred Telephone: 046 624 3616 E-mail: info@kingspa.co.za www.kingsedgrp.co.za

PORT ALFRED

Dear Colleague Parent Consent to release this information: Parent Signature: _____ **CONFIDENTIAL REFERENCE** In order to assist us in our admissions procedures, we request that families provide us with a reference from the learner's current school. Your knowledge and understanding of the learner will be most helpful to us. Please complete the Confidential Reference and email it together with an updated school statement to info@kingspa.co.za at your earliest convenience. Please do not give this confidential report to the learner or the family. The family's application will only be processed once the completed form has been received at our school office. Thank you for taking the time to complete this form. **Yours Sincerely** Mrs R. Payne Principal **CONFIDENTIAL REFERENCE** Student's First Names: ______ Surname: _____ _____ Current Grade: _____ Name of the Current School: _____ In which year and grade did the learner first enrol at your school? ___ Please provide details below that relate to any instance where the student has been the subject of any disciplinary hearings or received any disciplinary sanctions (e.g. detention, community service, suspension or expulsion) at your school. 3. Please state which extra-curricular activities (Sport & Cultural) the learner has been involved in: Would you recommend this learner to our school? _____ If not, please provide a reason.







Excellence in Education to the Glory of God

	Yes	No		Yes	No
Speech Therapist/Audiologist			Occupational Therapist		
Psychologist (clinical/educational)			Psychiatrist		
Family Counsellor/Therapist			Other Counsellors		
Please make a brief comment on the	following fa	cets of the le	earner's involvement/progress i	n school life:	:
CATEGORY			COMMENTS		
Academic Aptitude					
Appearance and manners					
Attitude towards Staff					
Behaviour in Class					
Homework					
Leadership and Influence					
Learning Barriers					
Parental Involvement					
Peer Relationships					
Responsibility					
Self-Discipline					
Other					
the school fees paid regularly and up	to data?		Outstanding Amount		
the school lees paid regularly and up	to date:		Outstanding Amount		
me:		Signature: _			_
signation:			School Stamp:		
ease email: info@kingspa.co.za					
ease also include an updated sch	nool staten	nent.			
ank you!					
	nool stater	nent.			-

Has the student been assessed by or consulted with any of the following whilst at your school?