DOCUMENTS HANDED IN AT RIVIERA PRIMARY FOR ADMISSIONS 2025



GRADE APPLIED FOR	R	1	2	3	4	5	6	7	
NAME & SURNAME OF LE	ARNER								
CELL NUMBER OF PAREN	T.								
DATE HANDED IN:					RECEIVE	in BV:			
APPLIED WITH:		HOME		wo			BLING GR:		
DOCUMENTS MUST E	E CERT	IFIED!							
South African Citizen			Non-Sou	ıth African	Citizen				
Birth Certificate of child			Birth Certificate of child						
Clinic card (Gr R-3)			Clinic car	d (Gr R-3)					
Parent 1 / Legal guardian ID			Parent 1 / Legal guardian Passport/Asylum/Study permit						
Parent 2 / Legal guardian ID	Parent 2 / Legal guardian ID			Parent 2 / Legal guardian Passport/Asylum/Study permit					
Proof of home address	Proof of home address		Proof of home address						
Proof of work address	Proof of work address		Proof of v	vork addre	ss				
School report (Gr 2-7)	School report (Gr 2-7)		School report (Gr 2-7)						
MS N BREET (PRINCIPAL) RIVIE 6 Rose Street	ERA F et • Rivier Tel: 012 9	a • Preto	ARY	E STAMP		PARE	NT/GUARDIA	AN	
	te: www.l			PECEN	/ED EOF	ADAMS			
ACKNOWLEDGEA GRADE APPLIED FOR	R	1	2	3		ADMIS.	6	7	
NAME & SURNAME OF L					-	3	0		
CELL NUMBER OF PARE									
NB!! No space can be g		ed. You	have to	apply at	other scl	nools as v	vell.		
MS N BREET (PRINCIPAL)			DA	TE STAM	Þ	P	ARENT/GUA	RDIAN	

APPLICATION FOR ADMISSION - 2025



PLEASE COMPLETE WITH A BLACK PEN DO YOU HAVE ANY LEARNERS CURRENTLY/PREVIOUSLY IN THIS SCHOOL?

Yes	
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	No
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Name of other learner(s) :

I CARNED INCORMATION	DATE: 30 MAY 2024				
LEARNER INFORMATION LEARNER	OFFICE USE ONLY				
	Family code: Waiting list: A B				
Full names:	Family code: Waiting list: A L5 Number on waiting list:				
Surname:	Register class: ID copy:				
Preferred name:	Admission number: Transfer card:				
Date of birth:	Proof of residence:				
ID number:	Report card:				
Nationality:	Birth certificate:				
Religious denomination:	Clinic card				
Gender: Male Female	FAMILY INFORMATION				
Ethnic group:	Family status: Both parents Single parent - Unmarried				
Home language:	Foster care Childrens home Single parent - Divorced				
Preferred tuition language:	Other Re-composed Widow/Widower				
Dexterity: Left Right Both	Parents deceased: Mother Father None				
Learner mobile number:					
Learner e-mail address:	LEARNER HEALTH INFORMATION				
Admission date:	Chronic diseases:				
Grade in 2025 ;	Allergies:				
Years in grade for 2025 :	Medication:				
Years in phase for 2025 :	MEDICAL AID INFORMATION				
Pre-primary education attended: Formal Informal Other:	Name: Telephone number: Member number:				
Registered for social grant: Yes No	Primary member:				
Receives social grant: Yes No	FAMILY DOCTOR INFORMATION				
Media consent: Yes No	Name:				
Method of transport:	Telephone number:				
Faxi/Bus registration number:	Business address:				
Name of driver:					
Contact number:	INFORMATION OF PREVIOUS SCHOOL/PLAY GROUP/NURSERY				
NEXT OF KIN INFORMATION	First registration of learner in Gauteng:				
lame:	Learner attended school last year Yes No				
Contact number:	If yes, in which Province/Country:				
Alternative contact number:	Previous school				
Relation:	Telephone Number				
	Address				
	Province				
•					
	Highest grade in previous school				
	Reason for leaving the school				

DATE: 30 MAY 2024

BIOLOGICAL PARENT / LEGAL GUARDIAN 1 INFORMATION		
Title:	Residential address:	
Full names:		
Surname:		
Initials:	Postal address:	
Preferred name:		
ID number:		
Nationality:	Occupation status:	Own Employer Professional
Home language:		
Marital status: Common law marriage Divorced		Own Employer Non-Professional
Married Separated Single		House wife Part time
Widowed		Contract worker Pensioner
		Student Temporary
Communication: SMS E-mail Mail By hand Comm language:		Full time Unemployed
Mobile number:	Occupation:	
Home tel:	Employer:	
E-mail:	Work telephone number:	
	Employer physical address:	
Is the learner living with this parent? Yes No		
BIOLOGICAL PARENT / LEGAL GUARDIAN 2 INFORMATION		
BIOLOGICAL PARENT / LEGAL GUARDIAN 2 INFORMATION Title:	Residential address:	
	Residential address:	
Title:	Residential address:	
Title: Full names:	Residential address: Postal address:	
Title: Full names: Surname:		
Title: Full names: Surname: Initials:		
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality:		Own Employer Professional
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language:	Postal address:	Own Employer Professional Own Employer Non-Professional
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality:	Postal address:	
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language:	Postal address:	Own Employer Non-Professional
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language: Marital status: Common law marriage Divorced	Postal address:	Own Employer Non-Professional House wife Part time Contract worker Pensioner
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language: Marital status: Common law marriage Divorced Married Separated Single	Postal address:	Own Employer Non-Professional House wife Part time Contract worker Pensioner Student Temporary
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language: Marital status: Common law marriage Divorced Married Separated Single Widowed	Postal address: Occupation status:	Own Employer Non-Professional House wife Part time Contract worker Pensioner
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language: Marital status: Common law marriage Divorced Married Separated Single Widowed Communication: SMS E-mail Mail By hand Comm language:	Postal address: Occupation status: Occupation:	Own Employer Non-Professional House wife Part time Contract worker Pensioner Student Temporary
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language: Marital status: Common law marriage Divorced Married Separated Single Widowed Communication: SMS E-mail Mail By hand Comm language: Mobile number:	Postal address: Occupation status: Occupation: Employer:	Own Employer Non-Professional House wife Part time Contract worker Pensioner Student Temporary
Title: Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language: Marital status: Common law marriage Divorced Married Separated Single Widowed Communication: SMS E-mail Mail By hand	Postal address: Occupation status: Occupation: Employer: Work telephone number:	Own Employer Non-Professional House wife Part time Contract worker Pensioner Student Temporary
Full names: Surname: Initials: Preferred name: ID number: Nationality: Home language: Marital status: Common law marriage Divorced Married Separated Single Widowed Communication: SMS E-mail Mail By hand Comm language: Mobile number: Home tel:	Postal address: Occupation status: Occupation: Employer:	Own Employer Non-Professional House wife Part time Contract worker Pensioner Student Temporary

	Biological Parent 1		Biological Parent 2		Other
	Only	if 'Other', please con	nplete section A or B belo	w:	
A) INDIVIDUAL			B) COMPANY / CLOS	SED CORPORA	TION / TRUST
Title:			Title:		
Full names:			Name:		
Surname:			Registration number:	, , , , , , , , , , , , , , , , , , ,	
nitials:			Comm language:		
Preferred name:			Contact number:		
D number:			Fax number:		
lome language:			Business address:		
Communication:	SMS E-mail	Mail By hand	-	,	
Comm language:		Joy Hand	-		
Mobile number:			Postal address:		
Felephone number:			-		
ax number:			- -		
-mail:			BANKING DETAILS		
Residential address:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			Bank:		
-			Branch:		
ostal address:			Branch code:		
			Account type:	Cheque	Transmission Sav
-			Bank account number:		
_			Account holder:		
ONTRACT WITH SC	CHOOL WITH REGARDS TO	PAYMENT			
	Riviera Primary School and			(Name	of parent / guardian) with
egards to the paymen Riviera Primary So	chool is a Section 21 Public S	School and may raise	school fees in terms of the	South African Sc	chool Act (Act No. 94 of 40)
and the National E	ducating Policy Act (Act No.:	27 of 1996) - National	norms and standards of Sc	hool Fundina.	
	ian you are liable to pay sch	ool fees determined in	n terms of Section 39 of the	e South African	Schools Act, unless or to
As a parent/guard		er person is liable to a	IU ACI. Nove tha proporthad asked fo	es, as mav be in	ncluded in divorce settleme
Even though a cou	irt has determined that anoth	ei heisou is liable to t	ay the prescribed school te		
Even though a cou orders, and / or an	ort has determined that anoth my other appropriate court ord	ler, it remains the res	sponsibility of all persons wi	ho meet the defin	nition of "parent" in the So
Even though a cou orders, and / or an African Schools Ac	ort has determined that anoth by other appropriate court ord ct, to pay school fees and all	ler, it remains the res "parents" are jointly a	sponsibility of all persons wi	ho meet the defin	nition of "parent" in the So
Even that you have Even though a cou- orders, and / or an African Schools Ac will be charged by Payment of school	ort has determined that anoth by other appropriate court ord ct, to pay school fees and all the school in respect of a par fees to Riviera Primary Scho	ler, it remains the res "parents" are jointly a ticular learner.	sponsibility of all persons when the part of the part	ho meet the defin	nition of "parent" in the So
Even that you have Even though a country orders, and / or an African Schools Act will be charged by Payment of school (Please tick the approximation)	Irt has determined that anoth by other appropriate court ord ct, to pay school fees and all the school in respect of a par fees to Riviera Primary Scho plicable block with a cross)	der, it remains the res "parents" are jointly a ticular learner. ool will be made as foll	sponsibility of all persons wi and severally liable for the p ows:)	no meet the define payment of all sc	nition of "parent" in the So
Even that you have Even though a country or an African Schools Act will be charged by Payment of school (Please tick the apple A Full payment (OF) Payment over	Irt has determined that anoth by other appropriate court order, to pay school fees and all the school in respect of a par fees to Riviera Primary Schoplicable block with a cross) Once-off) on or before the last 12 months.	der, it remains the res "parents" are jointly a rticular learner. rool will be made as foll at date as determined of	sponsibility of all persons when the post of the post own in the post own in the post own in the post of the post	no meet the define and the comment of all score and the comment of all score and the comment of	nition of "parent" in the So
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1. I, parent / guardian of	hereby give permission that he/she may participate in al
academic, sport and culture activities presented by the school in an	organised manner. To participate in tests conducted by the school support
team with the object of improvement in school work and to identify of	
2. I grant permission that my child may be transported by a public bus c	ompany approved by the school management. If there is only a small
group of learners that needs to be transported, parents / teachers with v	alid drivers licences may be asked to transport them.
3. I accept that all reasonable precautions will be taken for the safety and	
of the medical and / or hospital fees if enforced upon, in case of an i	njury which cannot be ascribed to the responsible personnel's coarse
negligence.	
4. I hereby delegate my powers as parent / guardian to the Principal of	the school or representative if medical or surgical treatment may be
needed for my child. As far as I know, he/she is physically able to partic	,
5. I confirm that all medical information supplied in the Learner Information	section of this form is accurate and complete. This information may be
used in case of an emergency.	
6. I undertake to inform the school if any of the above information may cha	
7. I undertake to support my child to obey the Code of Conduct and the di	sciplinary system of Riviera Primary School as included in the Policy of
the school.	
8. I hereby confirm that the school is allowed to use photo's of my child in	any publication, in any format.
Signature of Parent / Guardian: Date:	
INDEMNITY	
I/We the parents of/I the guardian of	(name of learner) indemnify unconditionally
and without restriction Riviera Primary School and/or the shareholders of F	
School or any person acting on behalf of Riviera Primary School against a	ny losses, claims, injury or death that may be caused to the above
learner by virtue of his or her use of any of the facilities provided by Riviera	Primary School.
	•
Signed at on day of 2024	
Signature of Parent / Guardian :	