



## TERMS AND CONDITIONS AGREEMENT

### Section 1.1

- 1.1.1 The school operates Monday to Friday between 07h00 and 13h00. The Aftercare runs from 13h00 – 17h30.
- 1.1.2 Fees are devised on an Annual / Four Term basis and fees payment plans are structured as follows:
- 1.1.3 A **non-refundable deposit of R1000.00** is due upon registering your child; to secure his/her place.
- 1.1.4 *Annual Fee Payment - Option 1: **TOTAL YEAR'S FEES ARE PAYABLE YEARLY IN ADVANCE BY 1 JANUARY OF EACH YEAR***
- 1.1.5 *Quarterly Fee Payment - Option 2: **TOTAL TERM'S FEES ARE PAYABLE TERMLY IN ADVANCE BY THE FIRST DAY OF THE FIRST MONTH OF EACH TERM***
- |         |  |                                   |
|---------|--|-----------------------------------|
| 1.1.5.1 | <b>TERM 1:</b> January; February; March –    | <b>Fees Payment Due 1 January</b> |
| 1.1.5.2 | <b>TERM 2:</b> April; May; June –            | <b>Fees Payment Due 1 April</b>   |
| 1.1.5.3 | <b>TERM 3:</b> July; August; September –     | <b>Fees Payment Due 1 July</b>    |
| 1.1.5.4 | <b>Term 4:</b> October; November; December – | <b>Fees Payment Due 1 October</b> |
- 1.1.6 *Monthly Fee Payment - Option 3: **TOTAL MONTH'S FEES ARE PAYABLE MONTHLY IN ADVANCE AND ARE DUE BY THE FIRST DAY OF EACH MONTH, OVER TWELVE MONTHS***
- 1.1.7 Late Fees Fine: Late fees payments (fee payments which do not reflect by the 3<sup>rd</sup> of the month) are subject to a monthly fine, at the discretion of The School. Fee payments outstanding for a period of one month, will result in; children not being allowed to attend school, until the account is brought up to date. Fees outstanding for a period of three months are liable for legal action at your expense.
- 1.1.8 Irrespective of the reason for a period of absence from school, i.e. sickness, holidays etc. fees will be payable in full and **no exception** will be made.
- 1.1.9 The “non-refundable deposit” **is not refundable** under any circumstances whatsoever.
- 1.1.10 The “non-refundable deposit” **may not, under any circumstances whatsoever**, be used to cover the final month's or term's fees, as applicable.
- 1.1.11 The “non-refundable deposit” may **not, under any circumstances whatsoever**, be used to cover the “Termination of Enrolment/Notice” fees.
- 1.1.12 Private extra-murals are run onsite; as such these are **optional extras** for your child to attend at your discretion, at your own additional expense and responsibility, directly with the service provider.

Initial \_\_\_\_\_

## **Section 2.1**

- 2.1.1 Fees are subject to annual increase, in January of each year.
- 2.1.2 In signing this document you agree to Terms and Conditions of The School herein, but not limited to
- 2.1.3 In signing this document you agree to the Terms and Conditions of Enrolment and Enrolment Termination with The School herein, but not limited to.
- 2.1.4 The School is responsible only to the person who signs this form concerning any matter relative to the child. In the event of any dispute between two parties and controversial instructions, The School will use its own discretion and will not be responsible for the consequences.
- 2.1.5 No responsibility or liability will be accepted by The School for any loss or damage to personal property.
- 2.1.6 The principal or any other member of The School is not responsible for any damage or injury suffered due to accidents or any other mishaps or accidents during the entire period of attendance.
- 2.1.7 All reasonable precautions will be taken to ensure the safety and welfare of your child. However, should any damage or injury be suffered or sustained by your child, you shall be liable for payment of all medical and/or hospital accounts relating to the damage/injury. You hereby expressly waive any claim and indemnify The School against any claims whatsoever in respect of any such damage and/or injury.
- 2.1.8 You hereby give permission for your child to be taken to the doctor and/or hospital in the event of an emergency.
- 2.1.9 It is your sole responsibility to advise The School in writing, of any change of contact details (i.e. addresses and telephone numbers).
- 2.1.10 You are liable for payment of all attorneys and own client costs incurred by The School in relation to the collection of any outstanding costs, fees or debts owing to The School.

Initial: \_\_\_\_\_

### **Section 3.1**

#### **Termination of Enrolment:**

3.1.1 To terminate enrolment, The School **REQUIRES ONE FULL CALENDER TERMS WRITTEN NOTICE AS FOLLOWS:**

3.1.1.2 TERM 1: January, February, March – **Payment Due 1 January**  
**Written Notice given on 1 JANUARY, therefore; Term 1 Fees are payable for the duration of Term 1; irrespective of your child's attendance during this period.**

3.1.1.3 TERM 2: April, May, June – **Payment Due 1 April**  
**Written Notice given on 1 APRIL, therefore; Term 2 Fees are payable for the duration of Term 2; irrespective of your child's attendance during this period.**

3.1.1.4 TERM 3: July, August, September – **Payment Due 1 July**  
**Written Notice given on 1 JULY, therefore; Term 1 Fees are payable for the duration of Term 1; irrespective of your child's attendance during this period.**

3.1.1.5 TERM 4: October, November, December – **Payment Due 1 October**  
**Written Notice given on 1 OCTOBER, therefore; Term 2 Fees are payable for the duration of Term 2; irrespective of your child's attendance during this period.**

Initial: \_\_\_\_\_

### **Section 4.1**

#### **Payment Plan**

Package Chosen: \_\_\_\_\_  
(Refer to Fees Document)

Total Value of Package: \_\_\_\_\_  
(Refer to Fees Document)

Payment Plan Chosen (Circle):                      **Option 1**        /        **Option 2**        /        **Option 3**  
(Refer to Table Below)

<b>Payment Plans &amp; Options</b>	<b>Option 1</b>	<b>Option 2</b>	<b>Option 3</b>
<b>Payment Plan</b>	Annual	Quarterly	Monthly
<b>Payment Due</b>	1 January	1 January; 1 April 1 July; 1 October	1 <sup>st</sup> of Each Month
<b>Payable In Advance</b>	Once Off	X 4 Terms	X 12 Months

Amendments and Additional Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*PLEASE REFER TO THE ANNUAL PRICE LIST FOR THIS YEAR'S PACKAGES AND FEE STRUCTURES; AND NOTE THAT FEES ARE SUBJECT TO ANNUAL INCREASE FROM THE 1<sup>ST</sup> OF JANUARY EACH YEAR\***

Initial \_\_\_\_\_

Tel: 011 487 3129, WhatsApp:062 069 1513, Email:info@heps.co.za, Website:www.heps.co.za,

*Growing Remarkable Minds!*

## **Section 5.1**

By your signature hereto, you hereby agree that you are bound by the Terms and Conditions of The School, herein but not limited to. Furthermore, you agree that you will abide by the Terms and Conditions herein, but not limited to; of The School and Enrolment Termination, as well as your chosen Payment Plan (*Options: 1, 2, or 3*).

For and Behalf of Houghton Estate Preschool

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

Signature: \_\_\_\_\_

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

Signature: \_\_\_\_\_

Signed at Houghton Estate, on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

Parent/Guardian Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

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

Signature: \_\_\_\_\_

**Banking Details**  
**FNB Killarney**  
**Houghton Estate Family Centre**  
**62382268251**  
**256205**



HOUGHTON ESTATE  
PRESCHOOL

## Indemnity Form

I, the undersigned,

..... (Full names)

being the father/mother/guardian of

..... (Full name of child)

Hereby agree to the terms and conditions below and undertake to abide by them while my child is in the care of Houghton Estate Preschool.

1. Without prejudice to any other rights or remedies that Houghton Estate Preschool and its respective property, representatives, directors, officers, employees and agents, acting within their course and scope of their employment or mandate (each an "Indemnified Person"), I hereby agree to hold Houghton Estate Preschool and such Indemnified Persons indemnified against any losses, liabilities, costs, claims, damages, charges, expenses, actions or demands which may be made against Houghton Estate Preschool and such Indemnified Persons as a result of or in relation to any injury, accident, illness or damage to the aforementioned child or property. Such indemnity shall extend to include all reasonable costs, charges and expenses which Houghton Estate Preschool and Indemnified Persons may reasonably pay or incur in disputing or defending any claim or action in respect of which indemnity may be sought against you under this clause.
2. I hereby authorise Houghton Estate Preschool and its representatives, employees and agents to take all steps, which it in its absolute discretion may deem necessary, to have the said child admitted to a hospital, and treated by a doctor or other medical attendant. I further understand that I shall be held responsible for the payment of such medical and/or hospital accounts arising from such treatment.
3. I hereby grant my permission for the transportation of the said child in the school's vehicle for the aforementioned purposes, school and home runs where applicable, study trips and other outings arranged during the course of the school year.
4. Without prejudice to any other rights or remedies that I, my child, and my respective representatives and agents have, I hereby agree to being held liable for any losses, liabilities, costs, claims, damages, charges, expenses, actions, or demands caused by the aforementioned to Houghton Estate Private Preschool and its respective property, representatives, directors, officers, employees and agents, as a result of personal negligence and/or ill intention.

.....

Signature of parent or legal guardian

.....

Date



Dear Parents

While your child is in the care of HEPS teachers and staff, there will be occasions where we will take photographs / videos for the following reasons:

- The HEPS Display Board /portfolio.
- Promotional literature for the HEPS website and/other media platforms

We would be grateful if you would fill in this form to give us permission to use such content of your child for the reasons stated above either in printed or online form.

**N.B No mention of child's name(s) or disclosure of learners' identity will be done should any such content be used.**

I, the undersigned,

..... (Parent/Guardian Full names)

being the father/mother/guardian of

..... (Full name of child)

Agree  or Disagree  (Please tick where applicable)

to have my child's photographs, video(s) or any other media content used for the above-mentioned reasons while my child is in the care of Houghton Estate Preschool.

.....

Signature of parent or legal guardian

.....

Date