

REG. NO.: 003-124 NPO

Maatskaplike Werkers
Akkerjakker Creché
Kleuterbosch Pre-primêreskool
Naskoolsentrum

☎ (021) 883 3015
☎ (021) 886 4822
☎ (021) 883 2957
☎ (021) 883 2957



VERW. NO.:

✉ 2088, DENNESIG 7601
☎ (021) 887 6959
☎ (021) 887 4774
Webwerf: www.acvstell.org.za

AKKERJAKKER APPLICATION FORM

SURNAME and NAME of CHILD: _____

SURNAME and NAME - FATHER: _____

SURNAME and NAME - MOTHER: _____

STATUS: Married / Not Married / Divorced (Mark with X)

HOME ADDRESS: _____

E-MAIL ADDRESS: _____

ID NR. (Father): _____ ID NR. (Mother): _____

Cell nr. (Father): _____ Cell nr. (Mother): _____

EMPLOYER:

Father: _____ Tel nr.: _____

Mother: _____ Tel nr.: _____

HOME LANGUAGE: _____ NUMBER OF DEPENDANTS: _____

LANGUAGE FOR EDUCATION: _____

NUMBER OF CHILDREN THAT NEED CARE: _____

FROM WHEN DO YOU NEED CARE? DATE/IMMEDIATELY: _____

REASON FOR APPLICATION: _____

FIRST NAME	DATE OF BIRTH	CHILDHOOD ILLNESSES	ALLERGIES

CONTAGIOUS DISEASES FROM WHICH YOUR CHILD OR FAMILY SUFFER?

FAMILY DOCTOR: _____ TEL. NR.: _____

SIGNATURE (PARENT) DATE

SIGNATURE (PRINCIPLE OF CRÈCHE)

SUPPLY WITH APPLICATION FORM:

- * COPY OF CLINIC CARD / VACCINATIONS OF CHILD
- * CERTIFIED COPIES OF BOTH PARENTS' ID DOCUMENTS
- * CERTIFIED PASPORTS – COPIES IF FOREIGNERS, AS WELL AS CHILD'S PASSPORT COPY
- * BIRTH CERTIFICATE

AKKERJAKKER CRÈCHE-STELLENBOSCH

A. PERSONAL INFORMATION

FULL NAMES and SURNAME of CHILD: _____

FIRST NAME: _____ SEX: _____

DATE OF BIRTH: Day _____ Month _____ Year _____

B. FAMILY MEMBER / FRIEND THAT MAY BE CONTACTED IF PARENTS ARE NOT AVAILABLE:

FULL NAMES: _____

Home Address: _____ Tel.: _____

Work Address: _____ Tel.: _____

C. FAMILY

Home Language: _____ Denomination: _____

Name of brothers & sisters	School (if pre-school, State age)	Standard
_____	_____	_____
_____	_____	_____
_____	_____	_____

Person(s) by whom your child will be brought to the crèche in the morning

_____ and will be collected in the afternoon _____.

D. MEDICAL

Family doctor: _____ Tel.: _____

Convulsion or high fever as baby/toddler (if so at what age?)

Does your child have any disability/special needs? _____

E. CHILD

Is the child afraid of anything? _____

Anything you want to put under our attention? _____

F. GENERAL

Previous playgroups/crèche your child attended.

Name & Tel nr of institutions

Period of attendance

_____	_____
_____	_____
_____	_____

SIGNATURE OF PARENT/GUARDING

DATE

Information provided by (name): _____

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HOUSE RULES Akkerjakker Crèche

1. CARE TIME OF CRÈCHE

Care times are strictly adhered to, **MONDAY TO FRIDAYS from 06:30 till 18:00.**

2. ADMITTANCE

AKKERJAKKER is an **Afrikaans medium crèche** and the speaking and written language is Afrikaans, provision will be made for English speaking children.

The 3 to 4 year old- and 4 to 5 year old groups will have Afrikaans- and English medium separate classes.

3. NOTICE

Should it be a parent's intention to take your child permanently out of the crèche, the Principal must be informed in **WRITING ONE (1) CALENDER MONTH** in advance.

Parents will be liable for fees until a written notice has been received by the principal.

4. FEES

Fees are adjusted annually.

No invoice or billing statement is provided.

No responsibility is accepted for any money placed in your child's back pack.

ALL AKKERJAKKER CRÈCHE FEES ARE ALWAYS PAYABLE IN ADVANCE. Fees are payable before the 7th of the month. 10% Levy with late payments after the 7th of each month.

A **FINE** will be levied should your child be collected after the closing time. This is calculated on basis of **R 6-00** for each minute after **18:00**. With repeated infringements the **AMOUNT** of the fine will be **DOUBLED**.

If you do not adhere to the request, a written notification will be given to you and you will be responsible for that month's fees that will be used as the one calendar month's notification.

In the case of your child's fee being in arrears for one month, we may with immediate effect refuse to further care for your child. Your child's place in the crèche may then be allocated to someone else. (Any parent having difficulties in making payment can make an appointment with the Treasurer).

NO DISCOUNT will be given when children are absent for whatever reason.

WAYS OF PAYMENT

No CASH accepted. Card facilities at the ACVV Stellenbosch reception office.

Fees can be deposited directly in our current account: NEDBANK, STELLENBOSCH; Number 1498044859; Branch code 198765. Please state the **NAME** and **SURNAME** of your child as reference on your deposit slip.

By signing these Rules you as parent accept responsibility for the payment of all outstanding amounts and fees. In the case of your child's fee being in arrears for one month, we may with immediate effect refuse to further care for your child. Your child's place in the crèche may then be allocated to someone else. Outstanding fees will then be handed over to our attorney for recovery.

LEGAL FEES

In the event of outstanding fees being handed over to our attorneys for recovery, you will, besides for payment of all legal costs and charges calculated on an Attorney-and-Own Client scale, also be held liable for the payment of collection commission, tracing fees and interest (the ACVV Stellenbosch may levy mora interest at the applicable prescribed rate on due amounts not paid before or on due dates).

CREDIT CHECK

By your signature hereto, you consent to the ACVV Stellenbosch performing a credit check with the relevant credit bureau. All details that are provided to the ACVV Stellenbosch will be treated as strictly confidential and will not be divulged by us to any third parties except with your written consent.

5. ILLNESS

No child may attend the crèche with contagious illnesses/high fever (eg Measles, German Measles, Chicken pox, Gastro-enteritis etc.).

In case of an emergency your child will be taken to a nearby doctor.

If your child has on a regular basis rash/ulcers etc the child can be refused care until you have provided a doctor's certificate/report to the crèche.

If the principal of the crèche deems it necessary a doctor can be consulted especially in cases of high temperature, constant vomiting etc and action will be required by the parent before the child will be admitted again.

6. FOUL LANGUAGE AND UNEXCEPTABLE BEHAVIOUR

Foul language by children is not acceptable. Parents of children who constantly use foul language will be contacted and it will be expected from you to give attention in this instance. In severe cases, children can be expelled from the facility.

Constant unexceptionable behaviour will not be accepted at Akkerjakker. This will immediately be dealt with by the Principal and the relevant staff member to avoid further problems.

7. NO TOYS

The staff do not accept responsibility for toys that are brought to the crèche, this includes articles such as watches, pendants, beads, earrings etc. No responsibility will be accepted for any loss whatsoever!

8. MEDICINE

No medicine/vitamins will be administered by staff. If a child needs prescription medicine, it must be administered by the parents. If a child develops a high fever, fever syrup will be administered with consent of the parents/principals.

9. COMMUNICATION/LETTERS/NOTICES

Please download the d6 communicator through:
www.school-communicator.com/downloads

App Store
Play Store
Windows Store
Mobi Site

10. GENERAL

All children must rest as their age group requires.

Should you as parent send someone to collect you child, please inform the **Principal beforehand verbally/in writing or telephonic permission**. No child will entrusted to any other person than the parent or persons given written consent on the form.

The front and back gates and doors of the premises must **always be closed and pulled on lock**.

Children must be dropped inside the building at the relevant staff member. Under no circumstances may a child be dropped outside the gate. Bags must be put in the child's locker every morning. Taxi drivers must bring children to the class rooms.

Any **change of address, occupation, telephone or cellphone numbers** must be brought to the **attention of the Principal** as soon as possible.

Children will not be receive in their pyjamas. Children must be dressed at home. All clothing and shoes must be **clearly marked**.

- 11. ALL COMPLAINTS** must be addressed in **WRITING** to the Principal within three (3) days form the incident.

Camera material must be asked for within 24-hours after an incident.

- 12. In case of theft/fire private property** such as clothes, bedding etc is not covered by the ACVV Stellenbosch insurance policy.
- 13. No sweets or any snacks** will be allowed. The crèche provides everything. Yoghurt is allowed until the 2 – 2½ year (potty train) group.

ACKNOWLEDGEMENT OF RULES

I, _____ hereby acknowledge receipt
(father, mother or guardian)

Of the Rules of AKKERJAKKER CRÈCHE and declare that I am prepared to abide thereby.

SIGNED AT _____ ON THIS _____ DAY OF _____.

Signed:

FATHER, MOTHER OR GUARDIAN

DATE

PRINCIPLE: AKKERJAKKER CRÈCHE

DATE

AS WITNESS:

1. _____

DATE

2. _____

DATE

(PLEASE INITIAL EACH PAGE OF THE RULES)

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I, parent/guardian _____

Of child/children's names _____

Hereby gives written permission that he/she will be on the ACVV Stellenbosch premises from 06:30 until 18:00 under supervision of the ACVV Stellenbosch staff. This includes transport by ACVV Stellenbosch staff of my child/children to and from any destination, sepcifically transport on day-trips, pre-primary schools, school sports and any appointments to which my child/children must be transported too.

I hereby indemnify the ACVV Stellenbosch or any ACVV Stellenbosch staff member against any injury, loss or illness that my child/children may sustain during the course of my child/children's care on the premises of the ACVV Stellenbosch or during transport by the ACVV Stellenbosch staff and vehicles as described in the above paragraph.

FATHER, MOTHER OR GUARDING

DATE

AS WITNESSES:

1. _____

DATE

2. _____

DATE

PARENTS CONTACT DETAILS

FATHER: _____

Cell no: _____

Work Tel no: _____

MOTHER: _____

Cell no: _____

Work Tel no: _____

School attended by CHILD: _____

N: AAM EN VAN VAN KIND(ERS)
NAME AND SURNAME OF CHILD(REN):

Volle naam en van van vader/voog
Full name and surname of father/guardian:

ID no: e-mail.....

Huwelik Status: Getroud/Ongetroud/Geskei/Weduwee/Woon apart
Marital status: Married/ Unmarried/ Divorced/ Widower/ Separated

Adres/Address (Physical and postal):

.....(H)Tel.....

.....(W)Tel.....

.....(Cell).....

Naam en adres van werkgewer:
Name and address of employer:

..... Tel.....

Volle naam van moeder/voog
Full name of mother/guardian:

ID no: e-mail.....

Huwelik Status: Getroud/Ongetroud/Geskei/Weduwee/Woon apart
Marital status: Married/ Unmarried/ Divorced/ Widow/ Separated

Adres/Address (Physical and postal):

.....(H)Tel.....

.....(W)Tel.....

.....(Cell).....

Naam en adres van werkgewer:
Name and address of employer:

..... Tel.....

Hiermee gee ondergetekende(s) toestemming dat die bogenoemde telefoonnommers en e-pos adresse gebruik mag word deur die ACVV vir kommunikasie.

Hiermee onderneem ek/ons dat die genoemde inligting korrek is en dat die ACVV dienooreenkomstig skriftelik ingelig sal word van enige veranderinge.

I/We the undersigned agree that the above e-mail addresses and phone numbers may be used by the ACVV for communication.

I/We declare that the information provided above is correct and that I shall inform the ACVV timeously in writing of any changes in the abovementioned contact details.

.....
Vader/Voog
Father/Guardian

.....
Moeder/Voog
Mother/Guardian

.....
DATUM/DATE

d6 Toepassing/d6 Application

Dear Parents/Beste Ouers

02.08.2018

RE: COMMUNICATION & LETTERS

Please take note that all communication with parents go through the d6 communicator application. Attached the information if you have not downloaded the d6 school communicator. There will be no other form of communication with parents.

Please take note that all information on concerts, ticket sales etc. will be on the communicator.

IS: KOMMUNIKASIE & BRIEWE

Neem asseblief kennis dat alle kommunikasie met ouers deur die d6 kommunikator toepassing plaasvind. Aangeheg inligting om die d6 skool kommunikator aft e laai. Daar gaan geen ander vorm van kommunikasie met ouers plaasvind nie.

Neem asseblief kennis dat alle inligting oor skoolkonserter, kaartjie verkope ens. op die kommunikator gaan wees.

Vriendelike groete/greetings

Suzaan Brits

Desktop Download

Windows Desktop

Visit: www.school-communicator.com/downloads
Select your school in the drop down list on the left.
Click on the Windows button.
When asked to 'Run or save' the file, click 'save' first and thereafter run.

Follow the installation prompts.



Mac OS X

Visit: www.school-communicator.com/downloads
Select your school in the drop down list on the left.
Click on the Mac button. Follow the steps.

Mac installer is compatible with Mac OS 10.6 and higher.



Mobile Download

App Store

Visit the App Store. Search for the d6 school communicator. Click open. Follow the prompts and don't forget to personalise to receive the news you want.



Play Store

Visit the Play Store. Search for the d6 school communicator. Click open. Follow the prompts and don't forget to personalise to receive the news you want.

Windows Store

Visit the Windows Store. Search for the d6 school communicator. Click open. Follow the prompts and don't forget to personalise to receive the news you want.

Mobi site

We have created a mobi site that will work on any device, making the d6 school communicator available anywhere, anytime for your convenience. Register, then log in with your username and password: <http://schoolcommunicator.mobi/>

2019 FEES

Registrasion fee

A non-refundable registrasion fee of R 500-00 is payable with the enrolment of your child to ensure his/her place. The non-refundable registration fee for the second child there-after is R 1 000-00.

Monthly fees

R 2 500-00 per month payable in advance before or on the 7th of each month. A second child gets R 200-00 discount and a third child gets R 100-00 discount.

Notice

One (1) calendar month notice is applicable when your child is leaving the crèche. No discount when the child is absent due to holidays or illness.

Payment options

- Internet payment: Please use the child's NAME and SURNAME as reference
- Direct into bank account
- No cash payment will be accepted

BANK DETAILS

ACVV STELLENBOSCH

NEDBANK

ACCOUNT NUMBER: 1498044859

CODE: 149-821

REFERENCE: CHILD'S NAME AND SURNAME

Please e-mail proof of payment to the financial manager

Financial manager e-mail address: jvanrooyen@acvvstell.org.za

Principal e-mail address: suzaan@acvvstell.org.za

SECURITY SYSTEM:

- ID Cards attached to the lanyards with the ACVV logo on must be worn by all parents/taxi drivers when they bring and fetch children
- Parents please complete the attached form and attach ID photos of the 2 persons responsible to fetch and bring children
- Nobody will be allowed without ID cards and lanyards on the ACVV premises
- If the ID card is forgotten or lost you have to sign in and out at the gate
- The ID cards and lanyards are the property of ACVV Stellenbosch. If it gets lost you have to pay R50 at the ACVV office
- When a child leaves Akkerjakker permanently the ID cards and lanyards must be handed in at the office
- Teachers have to be informed by phone if somebody else come and fetch the children. These persons have to sign in and out
- The only entrance gate is the back gate at the parking area
- The front gate at Merriman Avenue will permanently be locked for safety and security
- The back gate will be locked at nine (9) am and opened at 15:30 (3:30)pm. If entrance is needed during that time, parents have to enter at the main front gate at Merriman Avenue at reception.
- All parents must report at reception before going to Akkerjakker although they have lanyards and ID cards
- The receptionist must always be informed who entered the building
- No children are allowed to walk alone to their classes. They must always be accompanied and hand over to the teachers
- All children must be fetched in the classrooms. Inform the teacher before leaving
- Please always pull the gate on lock. Do not leave open for parents.

The safety and security of all children are our first priority!!!

SECURITY SYSTEM

CHILD/CHILDREN'S NAME AND SURNAME:

.....
.....

1ST PARENT'S NAME AND SURNAME:

ID NUMBER:

CELL NUMBER:

ID PHOTO ATTACHED

2ND PARENT'S NAME AND SURNAME:

ID NUMBER:

CELL NUMBER:

ID PHOTO ATTACHED

TAXI DRIVER'S INFORMATION:

ID NUMBER:

CELL NUMBER:

ID PHOTO ATTACHED

The taxi driver's information is in place of the 2nd parent.

Iff a third person bring or fetch the child/children at school they must sign in and out.

Two (2) lanyards per family.