

**Registration Form: 2022**

*Please Note: Completion of this form is part of the procedure of registration. It must be accompanied by:*

1. *Copies of recent school reports*
2. *A copy of birth certificate, passport, or identity card*
3. *A receipt for payment of the registration fee. This fee is N$ 5000.00. It is* ***non-refundable*** *and indicates a commitment to attend Combretum Trust School in 2022. Once this fee has been paid and the registration is completed and signed, we guarantee a place for the learner at the school in 2022.*

*In addition, the registration procedure is taken as an understanding that this child will attend this school in 2022. If for any reason this decision is reversed the parent/guardian who signed the registration form must then sign a Notice of Withdrawal Form. It is normally necessary to give* ***one term’s*** *notice of withdrawal, or alternatively to pay the full school fees for this term in lieu of notice.*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SECTION A: Information about lEARNER** | | | | | | | | | |
| Grade applied for in 2022 |  | | | | | | | | |
| Surname |  | | | First Names | |  | | | |
| Date of Birth |  | | Nationality |  | | | | Gender |  |
| Present School |  | | | | | | | Grade |  |
| Mother Tongue |  | | | | Other Languages Spoken | |  | | |
| Will the learner live with his/her parents in Windhoek? | | | | | | | | | |
| If not, who will the learner stay with?  (Name of person and relationship to learner) | | | | | | | | | |
| Has the learner been asked to leave any other school?  (If yes, the learner will need to be interviewed before he/she can be accepted) | | | | | | | | | |
| Please also give the name of the school where the trouble occurred | | | | | | | | | |
| Has the learner been diagnosed with  any learning disabilities? | | | | | | | | | |
| Are there particular subjects that  the learner is experiencing difficulties in? | | | | | | | | | |
| Does the learner suffer from any long-term illness/medical conditions?  (E.g. asthma, epilepsy etc.) | | | | | | | | | |
| Name of Doctor (if applicable) | | | | | | | | | |
| **For Official use only** | | | | | | | | | |
| Interviewed by  \*(where applicable) | |  | | | | | | | |
| Accepted by | |  | | | | | | | |
| Registration receipt number | |  | | | | | | | |

*\* Interviews are necessary for non-Namibians in all grades, for learners who have been asked to leave previous schools, and for* ***all*** *learners applying for senior grades. Appointments must be made through the school secretary +264 81 286 2864 or Email:* *[combretum](mailto:combretum)school@gmail.com*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SECTION B: INFORMATION ABOUT PARENTS/GUARDIANS** | | | | | |
| **Information about Parent/Guardian 1** | | | | | |
| Surname |  | | First Names |  | |
| Relationship to learner |  | | | | |
| Occupation |  | | | | |
| Employer |  | | | | |
| Postal Address  Physical Address |  | | | | |
| Cell phone number |  | | Work telephone number | |  |
| Fax number |  | | Home (landline) number |  | |
| e-mail address |  | | | | |
| **Information about Parent/Guardian 2** | | | | | |
| Surname |  | | First Names |  | |
| Relationship to learner |  | | | | |
| Occupation |  | | | | |
| Employer |  | | | | |
| Postal Address  Physical Address |  | | | | |
| Cell phone number |  | | Work telephone number | |  |
| Fax number |  | | Home (landline) number |  | |
| e-mail address |  | | | | |
| **Person responsible for payment of fees** | | | | | |
| Surname | |  | Initials |  | |
| Postal Address  Physical Address | |  | | | |
| Cell Phone Number | |  | Work telephone number |  | |
| Fax Number | |  | Home (landline) number |  | |
| E-mail Address | |  | | | |

**DECLARATION BY PERSON RESPONSIBLE FOR SCHOOL FEES**

I …………………………………………………………………………………………………………………………………… (Name in block letters)

Declare that I hereby take responsibility for the payment of school fees for

……………………………………………………………………………………………………………………………………… (Name of learner) at Combretum Trust School. I declare that I have read and understood the Fee Structure Document. I understand that if the learner is to be withdrawn from the school it is necessary to give due notice of this withdrawal, and that failure to give adequate notice of withdrawal will result in my having to pay fees *in lieu* of notice for the time specified in the Fee Structure Document.

Signed………………………………………………………… at………………………………………………… Date…………………………………………

