



# HERITAGE ACADEMY

## *Independent Christian School*

8 STOTT ROAD PRESTBURY PIETERMARITZBURG 3201

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## APPLICATION FOR BOARDING

NAME : \_\_\_\_\_

ADMIT TO GRADE : \_\_\_\_\_

YEAR : \_\_\_\_\_

SCHOOL & BOARDING

Photograph of Child

### FOR OFFICE USE ONLY

Date Deposit paid and receipt number : \_\_\_\_\_

Deposit amount : \_\_\_\_\_

Date of interview : \_\_\_\_\_

Interviewer : \_\_\_\_\_

Accepted for

Grade : \_\_\_\_\_

In Year : \_\_\_\_\_

Signature of Interviewer : \_\_\_\_\_

PLEASE NOTE ALL FIELDS REQUESTED NEED TO BE FILLED IN

**CHILD'S DETAILS**

Surname : \_\_\_\_\_

First Names : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Age: \_\_\_\_\_

Gender : \_\_\_\_\_

Grade in Admission to Boarding Establishment : \_\_\_\_\_

**PARENTS' DETAILS**

**MOTHER:**

Name and Surname: \_\_\_\_\_

Identity Number : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_ Postal Code : \_\_\_\_\_

Telephone Numbers :

Home : \_\_\_\_\_ Work : \_\_\_\_\_

Cell : \_\_\_\_\_ E-mail address : \_\_\_\_\_

**FATHER:**

Name and Surname: \_\_\_\_\_

Identity Number : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_ Postal Code : \_\_\_\_\_

Telephone Numbers :

Home : \_\_\_\_\_ Work : \_\_\_\_\_

Cell : \_\_\_\_\_ E-mail address : \_\_\_\_\_

**GUARDIAN:**

Name and Surname: \_\_\_\_\_

Identity Number : \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_ Postal Code : \_\_\_\_\_

Telephone Numbers :

Home : \_\_\_\_\_ Work : \_\_\_\_\_

Cell : \_\_\_\_\_ E-mail address : \_\_\_\_\_

**MEDICAL AID**

Name of Medical Aid : \_\_\_\_\_

Membership Number : \_\_\_\_\_

Name of Main Member : \_\_\_\_\_

**MEDICAL HISTORY** : *(allergies if any – to be accompanied by doctor's certificate)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**MEDICAL TREATMENT**

I hereby consent to the administering of first aid and to consultation with a doctor in the case of an accident or suspected illness of my child \_\_\_\_\_. I understand that discretion will be used and that those in authority will first make every effort to contact me or my spouse or the legal guardian. I agree to carry any cost incurred for medical purposes.

Signatures:

Mother: \_\_\_\_\_

Father : \_\_\_\_\_

**OR**

Legal Guardian : \_\_\_\_\_

Witness 1 : \_\_\_\_\_

Witness 2: \_\_\_\_\_

**CONDITIONS OF ACCEPTANCE AT**  
**THE HERITAGE ACADEMY BOARDING ESTABLISHMENT**

I/We the undersigned \_\_\_\_\_  
(Father/Guardian)

and \_\_\_\_\_  
(Mother/Guardian)

of \_\_\_\_\_  
(Child)

hereby agree to the terms of acceptance of the above child as a boarder at the Heritage Academy Boarding Establishment as outlined below.

1. I/We give the Principal of Heritage Academy full responsibility to act in loco parentis over my/our child. Similarly any other staff who has authority over my/our child may exercise discipline in an accountable manner.
2. I/We understand that while the greatest care will be taken to protect the well-being of my/our child, I/we will not hold the school - Heritage Academy, or the Boarding Establishment of Heritage Academy, or the Board, Principal or members of staff of the said school, or the Supervisor or Boarder Master/Mistress of the said Boarding Establishment, responsible for any accidental harm, distress or without permission.
3. I/We understand that while my/our child's possessions will be taken care of, I/we do not hold the School or Boarding authorities responsible for any loss of property.
4. I/We understand that the Principal reserves the right to terminate my/our privilege of using the Boarding Establishment facilities with immediate effect if I/we do not pay the due fees by the required date, or if my/our child refuses to behave in a desirable manner, or if there is any serious breach of our non-compliance with the general expectations and code of conduct of Heritage Academy.
5. I/We accept the terms of the Conditions of Acceptance and the Financial Policy for Boarding.

**Signed:** \_\_\_\_\_ (Father/ Mother/  
Guardian)

at Pietermaritzburg on \_\_\_\_\_  
(date).

**As Witness:** \_\_\_\_\_

**To be completed by Parent/ Guardian:**

**Name of Parent / Guardian:**

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**Name of Learner:**

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I have read and understand the guidelines as applicable to Heritage Academy Boarding Establishment. I have chosen to place my child in this Boarding facility and authorise the Principal and Superintendent to act on my behalf during emergencies. I will also do my best to ensure that my child does not contravene any of the guidelines stated. Should my child contravene these guidelines, I understand that he/she will be liable for disciplinary action against him/herself. I further understand that's serious or continuous contravention can lead to immediate suspension or even expulsion from the Boarding Establishment.

In addition to the parents/guardians named in the document, I allow **only the people listed on the next page** to visit my child on weekends and after hours and to sign my child out of the Boarding Establishment. I accept full responsibility for the actions of these people while they visit my child.

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Signature of Father / Guardian

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Date

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Signature of Mother / Guardian

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Date

**PLEASE FILL IN THE LIST OF AUTHORISED GUARDIANS**

**Please provide a copy of the authorised Guardians ID's**

**Guardian 1**

Surname: \_\_\_\_\_

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

Title: \_\_\_\_\_ Identity Number: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_ Cell: \_\_\_\_\_

Home: \_\_\_\_\_ Work: \_\_\_\_\_

**Guardian 2**

Surname: \_\_\_\_\_

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

Title: \_\_\_\_\_ Identity Number: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_ Cell: \_\_\_\_\_

Home: \_\_\_\_\_ Work: \_\_\_\_\_

**Guardian 3**

Surname: \_\_\_\_\_

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

Title: \_\_\_\_\_ Identity Number: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_ Cell: \_\_\_\_\_

Home: \_\_\_\_\_ Work: \_\_\_\_\_

**To be completed by learner:**

Name of Learner:

\_\_\_\_\_

Grade : \_\_\_\_\_

I have read and understand the guidelines as applicable to the Heritage Academy Boarding Establishment.  
I understand that should I contravene any of the guidelines or Heritage Academy rules or Code of Conduct, I am  
liable for disciplinary action against me. I further understand that serious or continuous contravention can lead  
to my immediate suspension or even expulsion from the Boarding Establishment.

\_\_\_\_\_  
Signature of learner

\_\_\_\_\_  
Date