Little Willow Montessori Workshop

Address: 7 Carrington Avenue, Athlone, 7764
Telephone: 021-6969326 / 0827755379
A/h: 021-6852443 **Fax:** 021-9591339
Email: hmfisher333@gmail.com
http://www.littlewillowmontessoripreschool.co.za

Application and Registration

Prospective Learner Information:

Name of learner: ..... Date of birth: ..... Sex: .....
Day address: .....Code: .....

Mother's Details:

Full name: ..... Occupation: ……..
Telephone: ….....(H).....(W).....(C).....(F)
Work address: ..... Email: .....
Address (if different from child): .....
.....Postal Code: .....

Father's Details:

Full name: .....Occupation: .....
Work address: ..... Email: .....
Telephone: .....(H).....(W).....(C).....(F)
Address (if different from child): .....
.....Postal Code: .....

General Information:

Home language: ..... Religion: ..... Marital status: .....
Younger Siblings (name/age): .....
Doctor's name: ..... Phone no: 021-.....Med Aid Scheme:.....no.:.....

Authorized persons to collect child from school (other than the above mentioned):

1. Name: ..... Relationship: ..... Tel: .....(h).....(w)
2. Name: ..... Relationship: ..... Tel: .....(h).....(w)

Emergency Contacts (other than the above mentioned):

1. Name: ..... Relationship: ..... Tel: .....(h).....(w)
2. Name: ..... Relationship: ..... Tel: .....(h).....(w)

Admission Details:

Desired date of admission: **.....**

Signatures:

Parents / Guardians: ..... Date: .....

Please attach a **non-refundable enrolment fee of R500.00** to secure your application.

Banking Details: Little Willow Montessori Preschool. Standard Bank acc no.: 073311448 (reference: child's name and surname).