

LAERSKOOl BEKKER PRIMARY

Private Bag x 5003
Magaliesburg
1791

Hoof/Principal:
W.C Potgieter



☎ 014 577 1129
✉ info@Lsbekker.co.za
🌐 www.Lsbekker.co.za

BEKKER PRIMARY SCHOOL APPLICATION FOR RE-ADMISSION TO BEKKER PRIMARY

Day
Scholar

Hostel
Learner

YEAR: 2021

- Please indicate in the blocks above if your child will be a day scholar or a hostel learner.
- This form must be completed by parents/guardians and send back via email to info@lsbekker.co.za or school@lsbekker.co.za before or on 14 July 2020.
- Please write clearly and neatly

PARTICULARS OF PUPILS:

Child 1

Surname : _____
Name : _____
Date of Birth : _____
Present Grade : _____
Home Language : _____

Child 2

Surname : _____
Name : _____
Date of Birth : _____
Present Grade : _____
Home Language : _____

PARTICULARS OF APPLICANT 1 (PARENT / GUARDIAN):

Relation to child: _____

Surname : _____

First Name : _____

ID No : _____

Street Address : _____

Postal Address : _____

Work Address : _____

Home Tel : _____

Work Tel : _____

Cellular No : _____

Marital Status : _____

Employer : _____

Occupation : _____

PARTICULARS OF APPLICANT 2 (PARENT / GUARDIAN):

Relation to child: _____

Surname : _____

First Name : _____

ID No : _____

Street Address : _____

Postal Address : _____

Work Address : _____

Home Tel : _____

Work Tel : _____

Cellular No : _____

Marital Status : _____

Employer : _____

Occupation : _____

EMERGENCY CONTACTS:

Contact 1

Name : _____

Relation to child : _____

Cellular No : _____

Contact 2

Name : _____

Relation to child : _____

Cellular No : _____

MEDICAL TREATMENT:

Medical Scheme: _____

Medical Aid No : _____

Doctor's Name : _____

Doctor's Tel : _____

I declare that the above-mentioned information is true and correct.

SIGNATURE

DATE