Application form for Holiday Care 2024 Regentröpfchen



I wish to er	rol my child						
		First Name		Surname			
Class	S						
	Care at the DSJ:						
	Easter Holidays Applications close:	22.03.2024 - 05.04.2024 15.03.2024		Spring Holidays Applications close:	23.09.2024-04.10 16.09.2024	0.2024	
	Winter Holidays Applications close:	18.06.2024-17.07.2024 10.06.2024		December Holidays Applications close:	09.12.2024-13.1 02.12.2024	2.2024	
Please note that Holiday Care dates for January 2025 will be announced in the third term of 2024. There is no Holiday Care during Public Holidays. Costs per child (as from 01.01.2024) – Payable in advance: Half-day Care (from 07h20 until 14h30) R305.00 per day Full-day Care (from 07h20 until 17h30) Right-day Care (from 07h20 until 17h30)							
My child requires half-day Holiday Care for the following dates - please provide exact dates:							
My child requires <u>full-day</u> Holiday Care for the following dates - please provide exact dates:							
The enrolment will only be valid once you have received a confirmation from the school that a place is available and once the fee for the Holiday Care has been paid in advance. We regret that amounts paid are non-refundable, unless a written cancellation notice is received one week before your child should start with Holiday Care.							
The registration is valid for the stipulated period. No money will be refunded due to your child being absent for whatever reason including illness from a registered day. The DSJ reserves the right to deny any participation should your child not adhere to the school rules.							
	The parent is obliged to inform the holiday care team timeously and in writing should the child fall ill on any of the registered days.						
the school. after 17h30 undertake guardian(s)	The school takes no li D. After 17h30, the chil to inform the Holiday or persons previously	child timeously either before ability and responsibility for d remains the sole responsil Care Team personally, shoul a nominated by them collect	supervisior pility of the d persons o	n of children of the Holida parent/legal guardian. Th ther than them as parent	y Care group ne parent(s)	Initial	
This is vital for security reasons. Should an Holiday Care staff member be requested and in turn agree to supervise your child after 17h30, a charge of R150 will be added to your school fee account for every additional half hour or part thereof.						Initial	
Parent(s)/G	Guardian(s):						
Tel:		First Name		Su	rname		
	Home	Wo	rk		Cell		
E-mail:				ather			
Date:		Lega	guardian(s):			

Please also complete the attached internal information sheet and hand in <u>both</u> forms to Mrs Scheffler-Klynsmith (Email <u>schefflerj@dsjmail.co.za</u>) at reception.

Internes Informationsblatt für Ferienbetreuung Internal Information Sheet for Holiday Care



Name des Kindes Name of Child		
Name or Criliu	(Vorname / First N	Jame) (Nachname / Surname)
Klasse / Class		
Geburtsdatum / Date of Birt	:h	
Erziehungsberechtigte/r Legal Guardian	E-Mail	Telefonnummer / Telephone number Privat / Home - Arbeit/Work* - Handy/Cell
Mutter/Mother		
Vater/Father		
Spnstige/Other		
(*) nur im Notfall zu benutze	en / only to be used in case of em	nergency
_	Personen dürfen mein Kind von de ersons may collect my child from	<u> </u>
Name	Beziehung zum Kind Relationship to Child	Telefonnummer Telephone number
Eltern/Erziehungsberechtigt The Holiday Care Team mus guardian(s) or persons previ	ten oder die oben angegebenen P t be informed in writing or teleph iously nominated by them, collect	nonically, should persons other than the parent(s)/legal t the child(ren) from the DSJ.
		WEISEN KÖNNEN (Personalausweis, Pass, Führerschein) ENTIFY THEMSELVES (ID, Passport, Driver's Licence)
2. Krankenkasse: Medical Aid:		
Krankenkasse Medical Aid	Hauptversicherte Main member	Mitgliedsnummer Member number

3. Zusätzliche Information (falls zutreffend) Additional information (if applicable)

Hat Ihr Kind irgendwelche Ängste? Does your child experience any anxieties, have any fears?	Ja/Yes Nein/No
Wenn ja, welche? If yes, please briefly elaborate:	
Kann Ihr Kind sich selber an-und ausziehen? Can your child undress and dress themselves?	Ja/Yes Nein/No
Was isst Ihr Kind gerne? What does your child like to eat?	
Hat Ihr Kind irgendwelche Allergien? Does your child have any allergies?	Ja/Yes Nein/No
Falls ja, bitte Einzelheiten angeben. If yes, please elaborate:	
Welche Kinderkrankheiten hatte Ihr Kind? Which childhood illnesses has your child already had?	
Geht Ihr Kind zu irgendwelchen Therapien, usw.? Is your child going to any therapies, etc?	
Benötigt Ihr Kind Medikamente? Does your child require any medication?	Ja/Yes Nein/No
Falls ja, welche und Dosierung? If yes, what is the medication and its dosage?	
Mit wem lebt Ihr Kind? With whom does the child live?	
Weitere wesentliche Infos an den Lehrer Anything else the teacher should know?	