



HOUSE OF KNOWLEDGE MONTESSORI PRE-SCHOOL

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REGISTRATION FORM 2022/2023

Date of registration:									
STARTING DATE:									
HOK - 50 PARK AVENUE , WESTRIDGE				HOK - ALPHA STREET , WESPOORT PARK , BEACON VALLEY					
6 MONTHS - 18 MONTHS INFANT CLASS			18 MONTHS - 3 YEARS TODDLER CLASS		3 YEARS -6 YEARS PRE-SCHOOL CLASS				
REGISTRATION FEES R300 (ANNUALLY)			PLACEMENT FEE R500 (ONCE OFF)		HALF DAY 06:30 - 12:30 R1400.00 PER MONTH		FULL DAY 06:30- 18:00 R1750.00 PER MONTH		
EXTRA MURALS	LITTLE MERMAIDS SWIM SCHOOL		SWIMMING LESSONS 18 MNTHS - 6 YEARS		TUESDAY/WEDNESDAY - TIME SLOTS		R320 PER MONTH	RUSHANA CHARLES 021 393 6592	
	HELEN O'GRADY DRAMA SCHOOL		DRAMA LESSONS 2 - 6 YEARS		MONDAYS - 30 MIN LESSONS		R510 PER TERM	MICHELLE 021 6747478	
	SPORTS HUB		BASIC SPORT SKILLS 2 - 6 YEARS		THURSDAYS - 40 MIN LESSONS		R450 PER TERM	ZUBAIR 072 950 2464	
	MADRASSAH		ISLAMIC EDUCATION 2 - 6 YEARS		MONDAYS - THURSDAYS		R80 PER MONTH	NOORUN- NISAA 079 976 9373	
CHILD FULL NAME & SURNAME :									
GENDER :		Male / Female							
DATE OF BIRTH:				AGE:		____ YEARS & ____ MONTHS			
RELIGION:									
SIBLINGS AT H.O.K									
HOME LANGUAGE:									
PARENT/GUARDIAN/CAREGIVER		NAME:			TEL :				
HOME TELEPHONE:									
HOME ADDRESS:									
FATHER NAME:									
CONTACT DETAILS:		HOME			CELL		WORK		
MOTHERS NAME :									
CONTACT DETAILS:		HOME			CELL		WORK		
MARITAL STATUS :									
PERSONS ALLOWED TO COLLECT CHILD :		NAME : NUMBER:		NAME: NUMBER:		NAME : NUMBER:			
EMERGENCY CONTACT DETAILS:		NAME: NUMBER:		NAME : NUMBER:		NAME: NUMBER:			
MEDICAL:		DR NAME & NUMBER :			MEDICAL AID				
ALLERGIES:									
EXTRA MURAL FORMS		CLINIC CARD		BIRTH CERTIFICATE		FEES DECLARATION		DECLARATION OF UNDERSTANDING	SUPPLIES CHECKLIST