



KAY-DEE EDUCARE CENTRE

BAKING DAY

APPLICATION FORM



Kindly Complete and Return with your Extra Mural Fees Payment

CHILD'S SURNAME:		
CHILD'S FIRST NAMES:		
DATE OF BIRTH:		
HOME TEL:		
FATHER'S EMAIL:		
MOTHER'S EMAIL:		
FATHER'S WORK TEL:	CELL:	
MOTHER'S WORK TEL:	CELL:	

I / we, the parent(s) / guardian(s), hereby grant permission for my / our child(ren) to participate in the Kids Baking Day with Kay-Dee Educare Centre.

I / we acknowledge that I / we have to pay the fees in advance by the 1st day of each month.

I / we understand that Baking will take place twice a month.

I / we acknowledge that Baking is a FUN Creative Activity in which my / our child(ren) will be able to explore him-/herself during this time.

I / we understand that my / our child(ren) will be wearing LITTLE CHEF'S OUTFITS during the duration of this activity.

I / we understand that Baking will be kept as healthy as possible.

CONDITIONS:

- ⊗ Baking will take place during the school terms only, this will be done twice a month.
- ⊗ The fee will appear as a separate charge on your monthly account.
- ⊗ You may pay per month or per term.

PAYMENT PLAN:	MONTHLY	YES / NO	or	TERMLY	YES / NO
FEES PAID:	R		DATE PAID:		
PARENT PRINT NAME:				SIGNATURE:	
COMMENCEMENT DATE:					