

Dewdrop Educare

Enrolment Pack

2027 school year

We are glad you are considering Dewdrop Educare for your child. This pack has everything you need to apply and enrol. Please complete each form, gather the documents on the checklist, and return them to our office. Our team is here to help at every step.

What is inside

1. Enrolment checklist: the documents to submit
2. Application form: your child's and family details
3. Enrolment agreement: fees and terms to sign
4. Authorised collection list: who may collect your child
5. Emergency medical treatment and medication consent

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Enrolment checklist: what to submit

Please hand in this checklist together with the items below. Tick each item as you attach it.

Please submit

- ☐ Completed and signed Dewdrop Educare application form
- ☐ Signed enrolment agreement
- ☐ Copy of your child's birth certificate
- ☐ Copy of your child's clinic or health card (Road to Health booklet, showing immunisations)
- ☐ Certified copy of each parent's or guardian's ID or passport
- ☐ Two recent passport-size photographs of your child
- ☐ Proof of residence, not older than three months
- ☐ Proof of payment of the registration fee (R500, non-refundable)

If it applies to your family

- ☐ Copy of your child's ID or passport, if available
- ☐ Copy of your medical aid card
- ☐ Copy of a child support or other grant, if received
- ☐ Custody or legal guardianship documents, if applicable
- ☐ Any medical, allergy or therapy reports relevant to your child's care

Your child's place is confirmed once the signed forms and required documents are received and the deposit is paid. The registration fee and deposit are non-refundable. Banking and payment details are available from our office.

We use these details only to process your application and care for your child, in line with POPIA.

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Application form

Please complete all sections in print. Our office will confirm your child's class placement based on age.

Section A. Your child's details

Child's full first name(s) as per birth certificate	
Surname	
Identity number (if available)	
Date of birth (YYYY / MM / DD)	
Sex	☐ Boy ☐ Girl
Home language	
Population group (for official ECD records, optional)	☐ Black/African ☐ Coloured ☐ Indian/Asian ☐ White ☐ Other
Programme applied for	☐ The Mist (2 to 3) ☐ The Rain (3 to 4) ☐ The River (4 to 5)
Preferred start date	
Days your child will attend	☐ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri
Hours (from / to)	

Final class placement is confirmed by the school based on your child's age. Our placement date is 30 June.

Section B. Parent or caregiver 1

Full name of parent or caregiver 1	
Relationship to child	
Identity number	
Mobile number	
Email address	
Employer or place of work	
Physical address	
Town or city and postal code	

Section C. Parent or caregiver 2

Full name of parent or caregiver 2	
Relationship to child	
Identity number	
Mobile number	
Email address	
Employer or place of work	
Physical address	
Town or city and postal code	

Section D. Emergency contacts (if parents or caregivers are unavailable)

Contact 1: full name	
Relationship to child	
Phone number	
Contact 2: full name	
Relationship to child	
Phone number	

Section E. Medical and dietary information

Doctor's name	
Doctor's phone number	
Medical aid name and number (if any)	
Is your child's immunisation up to date?	☐ Yes ☐ No
Allergies, and any treatment we should know about	
Health conditions we should be aware of	
Any additional support your child may need	
Dietary notes	

Our menu is strictly halaal and freshly prepared on site. Only water is served, and parents pack their own snacks. Fresh fruit is available at the centre.

Section F. Family and helpful information (optional)

Siblings and your child's position in the family	
Anything else you would like us to know about your child	

Section G. Income source (for official ECD records, optional)

Does the family receive any of these?	☐ Child Support Grant ☐ Foster Care Grant ☐ Disability Grant ☐ Pension ☐ None
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Section H. Declarations and consent

- ☐ I consent to Dewdrop Educare collecting, storing, sharing and eventually destroying my and my child's personal information for the purpose of running and managing the programme. I understand this may be shared with government where required by law, and stored for up to three years after my child leaves, then safely destroyed, in line with POPIA.
- ☐ I give permission for my child to appear in photos or videos used within the school and shared with parents and caregivers. My child's name will not be shown, and the images will not be sold or shared for outside use.
- ☐ I agree to pay the monthly fees and to follow the rules and policies of Dewdrop Educare.

Signature and date

Signed	Full name	Relationship to child	Date
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Office use only

Date received	Documents checked (Y/N)	Placement confirmed	Staff initials
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Enrolment agreement

Terms of enrolment for the 2027 school year. Please read it, complete the details below, and sign.

Child and family

Child's full name	
Parent or caregiver name	
Programme selected	☐ School Programme (7:30 to 15:00) ☐ Full Day and Aftercare (7:30 to 17:30)
Start date	

Fees for 2027

Programme	Hours	Monthly fee
School Programme	7:30 to 15:00	R2 500
Full Day and Aftercare	7:30 to 17:30	R2 900

Registration fee	Once-off, payable on application. Non-refundable.	R500
Deposit	Equal to one month's fees, payable on acceptance. Non-refundable.	1 month

Payment terms

- The registration fee of R500 is payable once, on application, and is non-refundable.
- A deposit equal to one month's fees is payable on acceptance of a place. The deposit is non-refundable and covers the first month of the school year.
- Thereafter, fees are paid in 11 equal monthly instalments. The first instalment is due on 1 February 2027 and the final instalment on 1 December 2027.
- Together, the deposit and the 11 instalments cover the full 2027 school year.
- Each instalment is due by the 1st of the month. Fees are paid by EFT to the account provided by the office.
- A late payment fee of R200 applies to any instalment not received by the 7th of the month.
- A sibling discount of 10% applies to the second, and each further, child, on the younger child's monthly fee. The R500 registration fee is waived for siblings. It applies while both children are enrolled and fees are up to date, and is not combined with other discounts.

Absence, public holidays and closures

- Fees are charged in full and remain payable regardless of absence, illness, public holidays, or school closure days. No reduction or refund is given for days not attended.

Extra-murals

- Extra-murals are optional and are charged in addition to the monthly fee. They are confirmed each term and are subject to change.

Late collection

- Children are to be collected by the end of their chosen programme: 15:00 for the School Programme, or 17:30 for Full Day and Aftercare. Late collection is charged at R50 per 15 minutes, or part thereof.

Withdrawal

- One calendar month's written notice is required to withdraw a child. Fees are payable for the full notice month. The deposit is non-refundable.

Fee reviews

- Fees are reviewed each year. Any increase is communicated in writing at least one month in advance.

Agreement and signature

By signing below, I confirm that I have read and accept these terms, and I agree to follow the policies of Dewdrop Educare as set out in the parent handbook.

Parent or caregiver

Full name	Signature	Date
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For Dewdrop Educare

Name	Signature	Date
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Authorised collection list

For your child's safety, only the people listed here may collect your child. Our staff may ask any adult for ID before releasing a child. To add or remove a person, please tell the office in writing.

Child and parents

Child's full name	
Class or programme	
Parent or caregiver 1: name and phone	
Parent or caregiver 2: name and phone	

People authorised to collect this child

Full name	Relationship	ID number	Phone number

Collection password (optional)

Password	
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If you set a password, our staff may ask any adult to give it before releasing your child.

Signature

I confirm that the people listed above are authorised to collect my child. I will notify the office in writing of any changes.

Full name	Signature	Date
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Emergency medical treatment and medication consent

This consent helps us care for your child if they become unwell or need medical help. We will always try to contact you first.

Child and medical details

Child's full name	
Date of birth	
Allergies or conditions we should know about	
Doctor's name and phone	
Medical aid name and number	
Emergency contact: name and phone	

Consent

- ☐ I give permission for Dewdrop Educare staff to give basic first aid to my child.
- ☐ If my child needs urgent medical care and I cannot be reached, I give permission for staff to arrange emergency medical treatment, including transport to the nearest hospital or clinic, and to act on medical advice in my child's best interest.
- ☐ I give permission for staff to administer prescribed medication strictly as per my written instructions. I will provide medication in its original packaging, labelled with my child's name.

Staff will not give any medication without your written permission. Please update the office if your child's medical needs change.

Signature

Full name	Signature	Date