



APPLICATION FORM

CHILD INFORMATION

Name:	Languages Spoken:
Date of Birth: [] M [] F	Area of Living:

PARENT / GUARDIAN INFORMATION

Father's Name:	Mother's Name:
Nationality:	Nationality:
Mobile No:	Mobile No:
Email:	Email:
Job Title:	Job Title:
Employer:	Employer:

EMERGENCY CONTACTS (APART FROM PARENTS)

Name	Relation to child	Number

AUTHORISED PICK-UP PERSON

Please list below any other adults authorised to collect your child from Safari International School on your behalf. (Relative/Friend/Nanny etc).

Name	Relation to child	Number

PRIMARY OPTIONS

TIME

- Term 1 – September - December
- Term 2 – January - March
- Term 3 – April - June

- Regular Day Program – 8:30am - 3:15pm
- Extended Day Program – 3:15pm - 4:15pm
(Homework Time)

PRESCHOOL OPTIONS

TIME

- Term 1 – September - December
- Term 2 – January - March
- Term 3 – April - June

- Morning Session – 8:30am - 1:30pm
- Full Day Program – 8:30am - 3:30pm
- Extended Day Program – 8:30am - 5:00pm

MEDIA AND PUBLICATION CONSENT

As a School it is necessary for us to take photographs of your child. We will use these photos for evidence of learning, assessment purposes, to display within the School, in School newsletters, in the educational app and similar. We may also wish to use photos for other purposes as below, please tick the appropriate response.

- I give permission for the use of my child's photograph for the above mentioned purposes.
 I give permission for the School to use photos of my child (including family members) on the Safari International School Website and social media. (e.g Facebook & Instagram)

DECLARATION

I/We have read and confirmed that all the information contained in this admissions application is true and accurate and agree that in the event information provided is incomplete, incorrect or inaccurate, Safari International School reserves the right to take necessary action including cancellation of admission.

Safari International School reserves the right to place our child in the level deemed most appropriate based upon age cut-off dates. I/We agree to fully abide by all of the School's policies in support of our children's wellbeing and his/her registration status, including tuition fee payments as and when due. I/We agree to undertake and keep Safari International School updated of any changes in the information related to our child or to ourselves at all times.

Parent/Guardian Name:

Signature:

Date:

TERMS AND CONDITIONS

Fees should be settled before the first day of term. An invoice will be issued, detailing payments due, approximately mid-way through the term. If fees are not paid by the end of the 1st week, a reminder will be sent to the parents. If fees are not paid by the end of the 2nd week, a late fee of USD 100 will be applied to the fees. If the fees are not paid by the end of the 3rd week, the child's admission will be terminated from the school. If the tuition fee is not paid in 1 installment, there will be a removal the 20 percent discount being enjoyed on the overall tuition fee.

There will be no refund or reduction in the case of illness, vacations, child's absence due to any personal reason, school closure due to extreme weather condition or school closure due to Government/Ministry declaration. Notices of withdrawal must be made in writing to the Principal/ Head of School. Tuition Fees paid in 1 Installment are not eligible for refunds. If a student misses a term, the tuition will be rolled over to the next term.

The Tuition Deposit is a non-refundable and non-transferable fee must accompany each new student registration and will be credited to the last tuition upon notice of withdrawal. If no notice or less than a term's notice is given, the deposit is forfeited whether or not your child attends.

HEALTH AND MEDICAL INFORMATION

Does your child have any of the following medical issues?

- | | | | |
|--|---|---|-----------------------------------|
| <input type="checkbox"/> Allergies | <input type="checkbox"/> Any food Intolerances | <input type="checkbox"/> Dietary Restrictions | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Asthma/Other Respiratory Difficulties | <input type="checkbox"/> Eczema/Skin Disorders | <input type="checkbox"/> Hay Fever/Sinusitis | |
| <input type="checkbox"/> Vision/Hearing Impairment | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Heart problems | |
| <input type="checkbox"/> Physical/Mental Disability | <input type="checkbox"/> Special Learning Needs | | |
| <input type="checkbox"/> Any other Health Issues _____ | | | |

If your child takes any regular medication, has ever been hospitalised, undergone surgery or received any recent medical treatment, please provide details below:

AUTHORISATION AND CONSENT FOR MEDICAL TREATMENT

I understand my child may need emergency treatment during School hours or during activities while he/she attends Safari International School, I authorise the School, to administer

- First aid
- Minor medical treatment
- Basic health screening such as;
 - BMI
 - Oral health
 - Eye test
 - Head lice/Nits inspection
 - Body temperature

As is deemed necessary under any circumstances, I consent for my child to receive such procedures and treatment. I understand the School will attempt to notify me in the event of any emergency requiring immediate medical care for my child, if the School is unable to notify me, my child will be treated by a duly qualified physician at the nearest hospital or emergency centre. Any medical information provided to the School may be shared with the emergency medical personnel. This authorisation applies to all School sponsored programs. Safari International School will contact the Akai Hospital in case of a medical injury or illness, giving the location and nature of emergency.

I acknowledge it is my responsibility to keep my child's records current and to notify in writing, changes to telephone numbers, work location, emergency contacts, health status, and immunisation records. I agree to notify the School if my child is exposed to any communicable disease.

I understand that before prescription medication is dispensed to my child, I will provide written authorisation, which includes specific information required to accurately administer the medication. Medication MUST be in original container with my child's name and dosage instructions on it and brought into the School by the parent or legal guardian. written authorisation, which includes specific information required to accurately administer the medication. Medication MUST be in original container with my child's name and dosage instructions on it and brought into the School by the parent or legal guardian.

I hereby confirm that all the above medical information is correct and accurate, to the best of my knowledge. I agree to provide Safari International School with any changes to this information as and when I become aware of them. I have attached my child's most up to date immunisation records, as requested.

Name of Parent/Guardian

Signature

Date

REGISTRATION PROCESS CHECKLIST

Step 1: To begin the registration process, please complete the registration form within this prospectus pack and read the Parent Handbook & Curriculum Handbook.

Step 2: Pay the fees required for the selected term

Step 3: Submit the required documents as listed below to the Admissions Office or Email to

study@safarischool.edu.gh

- 3 recent passport size photographs of your child (please write the child's name on the back of the photo)
- 1 copy of your child's passport and valid residence visa page
- An up to date copy of your child's immunisation records
- A copy of each parent's passport
- An academic progress report from your child's previous nursery/preschool (if applicable)
- Photographs of Child, Mother, Father and Authorised pick up person

Step 4: Purchase Uniforms at the Safari Front Desk from Monday to Friday 8am-3pm

[**Polo Shirt / T-Shirt** – GHS100 | **Shorts / Skirt** – GHS100

Contact: **+233 (0)55 000 9977** or Email: **cantonments@safarischool.edu.gh**

Please note these documents must be submitted before your child joins Safari International School. The School reserves the right to suspend joining dates until all documents have been received. Once the registration documents have been received, our Admissions Manager will be in contact with you to confirm registration for your child and sign the Admissions Letter.

Modes of Payment: **Electronic/Internet Transfer / Cheque / Cash**

Account Name: **Safari International Preschool**

Account Number: **USD: 6040144165 / GHS: 6010165431**

Bank Name: **Zenith Bank**

Branch: **Zenith Heights**

Indicate child's name as the reference of payment on any mode of payment you use.

Please ensure a receipt is issued for any cash payment.

Please note that all remittance fees and charges must be borne by the payer.

Payment Policies

Parents will be notified for any revision of the Terms and Conditions of Enrolment and Fee Policy. Latest Terms & Conditions are always available on the website – http://www.safarischool.edu.gh/Safari_International_Preschool_Terms_&_Conditions_CQ_Rev.pdf

School fees are billed mid-way through the term. School fees are linked to the fee refund policy. SIS shall provide a refund of any unconsumed part of school fees pro-rata if the student's enrolment is terminated based on the reason that SIS is unable to provide the program and resources to meet the student's learning needs. SIS reserves the right to withhold the release of reports, recommendations and other documents, and to suspend or withdraw students, if school fees are in arrears.

Students commencing class after the first month through a term shall be entitled to have their school fees prorated.

SIS reserves the right to impose a fine of USD100 on late payments of any school fee and returned cheque.

For Enquiries Contact: +233 55 000 9555