

BERGVLIET HIGH SCHOOL FAMILY INFORMATION FORM

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e-mail <u>admissions@bhs.org.za</u>

Name of Learner					Gr	ade		Receipt No: For completed applications only		
Date of Admission					Te	erm				
Please note that we have attached a Specialist Art AND Music form should your child wish to take Specialist Art OR Music.										
DETAILS OF PARENT 1										
Surname								Title		
First Names										
Identity No					e-mail					
Physical Address										
							Postal C	ode		
Cell No					Work No)				
Place of Work										
Occupation										
Marital status	Married		Single/Separate d/ Widowed			Divorced			Re-married	
Relationship to learner	Biological parent		Stepparent			Legal Guardian			Other Specify	
If re-married, give steppare	ent's fir	rst name						Cell no		
			DETA	ILS OF P	ARENT 2					
Surname								Title		
First Names										
Identity No			e-mail							
Physical Address										
						Postal Code				
Cell No					Work No)				
Place of Work										
Occupation										
Marital status	Married		Single/Separate d/ Widowed			Divorced			Re-married	
Relationship to learner	Biological parent		Stepparent			Legal Guardian			Other Specify	
If re-married, give stepparent's first name								Cell no		
			DETA	ILS OF S	IBLINGS					
No of children in family			Is learner the 1 st				1 st , 2 nd , 3	3 rd , etc., in	family?	
Siblings attending BHS, if any		Name			Grade	ide		House		
Siblings attending other schools		ols Name			Grade					
			LEAR	NING SU	JPPORT					
Learner Support: Intervention Required							Yes	No		
(relating to barriers to learning / concession)										
SCHOOL FEES										
Who is responsible for payment of school fees?		Parent 1	Parent 2	Both Sponsor		М	Method of Payment		Debit order	EFT
Do you receive a welfare grant/foster subsidy?		Yes	No	Do you need a fee exen			e exempti	on?	Yes	No