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Lyttelton

0140

Company Registration:2007/211989/23

EMIS No: 700400303

Email: [info@elturion.co.za](mailto:info@elturion.co.za)

Web: [www.elturion.co.za](http://www.elturion.co.za)

### APPLICATION PROCEDURE

Please complete and return the **Application for Admission Form** to the School's Admissions office with the following:

- Two colour passport photographs of the student applying for entry to Elturion Christian School
- A certified copy of the student's 2 most recent school reports/statements of symbols.
- Transfer Letter from Previous School.
- Copies of reports pertaining to any intervention which might have taken place i.e. Occupational Therapy, Speech Therapy, Remedial etc.
- A certified copy of the student's birth certificate.
- A certified copy of both parents I.D. documents.
- Copy of the Immunisation Card

A NON-REFUNDABLE registration fee of R3000.00 (Three Thousand Rand) is due. (Please note, this fee is not credited against school fees). This amount should be paid into the Capitec Account.

EDUCATIONAL LEVIES are also payable end of November.

Should you require any further information, please do not hesitate to contact our Admissions Secretary (Natalie) during office hours on 012 654 6818.

Forms can be emailed back to [info@elturion.co.za](mailto:info@elturion.co.za)



### **School Fees 2025**

Pre-school (Age 4 months to 2 years)	R36 300pa (R3 300 x 11 months)
3 to 5 year Smurfs and RR	R39 600pa (R3 600 x 11 months)
Primary School (Gr R – 7)	R58 080pa (R5 280 x 11 months)
High School (Gr 8 – 9)	R60,500pa (R5 500 x 11 months)

### **Discounts**

5% discount if the school fees are settled for the year by 28 February.

5% sibling discount

R500 pm discount for every new child referred to Elturion and successfully enrolled at Elturion. This is only applicable for a one 11-month cycle only.

### **Not included in the school fees**

Bus fees to sporting events

School tours

Innings

Outings and the transport

All fundraising events

Individual robotic models



**Banking Details for School Fees ONLY:**

**FIRST NATIONAL BANK**

Acc Name: Elturion Independent Christian School  
Acc No: 62178512250  
Branch: 261550-Centurion  
Ref: Childs Name and Surname

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**Banking Details for Registration Fee and any other payment:**

**CAPITEC BANK**

Account Holder: Elturion wheels  
Acc No: 1340605323  
Branch: Centurion  
Ref: Child's name, Surname and payment  
Description

**NB: Please note that only the payment of the registration fee and the submission of the signed conditions of acceptance of offer secures a place at Elturion Independent Christian School.**



ACCEPTED

Admission no:

## Elturion Independent Christian School Admission Form

### PERSONAL DETAILS OF LEARNER

FIRST NAME(S)

SURNAME

APPLICATION DATE

YEAR OF ENROLMENT

CURRENT GRADE

YEAR

GENDER

MALE

FEMALE

DATE OF BIRTH

HOME LANGUAGE

IDENTITY NUMBER

OR

PASSPORT NUMBER

NATIONALITY

PREVIOUS SCHOOL

SIBLINGS: NAME & SURNAME

PRESENT SCHOOL

GRADE



*Please indicate your choice with an X over the Applicable Block*

LEARNER RESIDES WITH	BOTH PARENTS	MOTHER	FATHER	OTHER:
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RELIGION	
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DEXTERITY OF LEARNER	RIGHT HANDED	LEFT HANDED	AMBIDEXTROUS
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MARITAL STATUS OF PARENTS	MARRIED	DIVORCED	SINGLE	REMARIED
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EXTRA MURAL ACTIVITIES				
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MY CHILD WILL BE ATTENDING AFTERCARE?	YES	NO
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I HEREBY GIVE THE SCHOOL PERMISSION TO POST PICTURES OF MY CHILD ON SOCIAL MEDIA / SCHOOL NEWSLETTERS
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YES
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NO
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**PARENT/ GAURDIAN (FATHER)**

NAME & SURNAME

TITLE

IDENTITY NUMBER

OR

PASSPORT NUMBER

POSTAL ADDRESS

CODE

RESIDENTIAL ADDRESS

CODE

E-MAIL ADDRESS

CELL NUMBER

HOME TEL NUMBER

OCCUPATION

EMPLOYER

WORK ADDRESS

CODE

TELEPHONE (WORK)



**PARENT/ GAURDIAN (MOTHER)**

NAME & SURNAME

TITLE

IDENTITY NUMBER

OR

PASSPORT NUMBER

POSTAL ADDRESS

CODE

RESIDENTIAL ADDRESS

CODE

E-MAIL ADDRESS (Please Print)

CELL NUMBER

HOME TEL NUMBER

OCCUPATION

EMPLOYER

WORK ADDRESS

CODE

TELEPHONE (WORK)



### ALTERNATIVE CONTACT PERSON

NAME & SURNAME

TITLE

RELATIONSHIP

E-MAIL ADDRESS

CELL NUMBER

HOME TEL NUMBER

### MEDICAL DETAILS

DOCTOR: NAME

TELEPHONE NO

MEDICAL FUND

MEDICAL FUND NO

REMARKS/ ALLERGIES

### PERSON RESPONSIBLE FOR ACCOUNTS

PLEASE INDICATE

FATHER

MOTHER

OTHER

E-MAIL OF PERSON RESPONSIBLE FOR ACCOUNTS

PARENT/RESPONSIBLE PERSON'S NAME & SURNAME

IDENTITY NO

OR

PASSPORT NUMBER





PHYSICAL ADDRESS			
		CODE	
POSTAL ADDRESS			CODE
HOME TEL		CELL NO	
OCCUPATION			
	EMPLOYERS NAME		
NUMBER OF YEARS IN CURRENT OCCUPATION			
NUMBER OF YEARS IN RESIDENCE			
OWNED	RENTED	BONDED	



I/We, the undersigned hereby confirm that the above information is true and correct. I/We undertake to inform the school of any change to the above information. I/We acknowledge that I/We shall be liable for payment of one full terms tuition fee if due notice of my/our intention to withdraw my/our child is not given one full term in advance. **No exceptions will be allowed.** In the event of your account being in arrears, Elturion holds the right to exclude your child until the account has been settled in full. I/We agree to the school doing a credit check if deemed necessary.

SIGNATURE: FATHER

SIGNATURE: MOTHER

FOR OFFICE USE

Year Entering:

Grade:

Sibling:  YES  NO

Admission No:

Registration Fee: R3000.00 paid?  YES  NO