

**LEERDERINLIGTING
LEARNER INFORMATION**

Merk toepaslike blokkie waar nodig
Mark appropriate block where necessary

Volle name:
Full names: _____
Van:
Surname: _____
Noemnaam:
Preferred name: _____

Geboortedatum:
Date of birth:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

ID-no.:

--	--	--	--	--	--	--	--	--	--

ID nr.:

--	--	--	--	--	--	--	--	--	--

Nasionaliteit:
Nationality: _____

Kerkverband:
Religious denomination: _____

Geslag: Manlik Vroulik
Gender: Male Female

Bevolkingsgroep:
Ethnic group: _____

Huistaal:
Home Language: _____

Onderrigtaal:
Tuition Language: _____

Links-/regshandig:
Left-/righthanded: _____

Selfoonnommer:
Mobile number:

--	--	--	--	--	--	--	--	--	--

E-posadres:
Email address: _____

Jare in huidige graad: Jare in fase:
Years in current grade: _____ Years in phase: _____

Preprimêre onderrig bygewoon:

Ja	Nee
Yes	No

Pre-primary education attended:

Geregistreer vir maatskaplike toelaag:

Ja	Nee
Yes	No

Registered for social grant:

Ontvang maatskaplike toelaag:

Ja	Nee
Yes	No

Receives social grant:

NAASBESTAANDE / NEXT OF KIN (nie ouers/not parents)

Naam en Van:
Name and Surname: _____

Kontaknommer:
Contact number: _____

Verwantskap:
Relation: _____

GESINSTATUS/FAMILY STATUS

Beide ouers Both parents	Enkelouer – nooit getroud Single parent - never married	
Enkelouer – geskei Single parent - divorced	Hersaamgestel Recomposed	
Weduwee /Wewenaar Widow/Widower	Pleegsorg Foster care	Ander Other

OUERS OORLEDE / PARENTS DECEASED

Moeder Mother	Vader Father	Geen None
------------------	-----------------	--------------

GESONDHEIDSINLIGTING/HEALTH INFORMATION

Kroniese siektes:
Chronic diseases: _____

Allergieë:
Allergies: _____

Medikasie:
Medication: _____

MEDIËSE FONDS/MEDICAL AID

Naam:
Name: _____

Lidnommer:
Member number: _____

Hooflid:
Primary member: _____

HUISDOKTER/FAMILY DOCTOR

Naam:
Name: _____

Telefoonnommer:
Telephone number: _____

HUIDIGE SKOOL/CURRENT SCHOOL

Eerste registrasie in Wes-Kaap:

Ja	Nee
Yes	No

First registration in Western Cape:

Skoolbywoning verlede jaar:

Ja	Nee
Yes	No

School attendance last year:

Huidige skool:
Current school: _____

Tel.:
Tel.: _____

Dorp/Stad:
Town/City: _____

Provinsie:
Province: _____

IMMIGRANTS/FOREIGN NATIONALS ONLY

	Father	Mother	Learner
Passport/Permit number:			
Expiry date:			
Origin country:			
Learner study permit nr:	N/A	N/A	
Expiry date of study permit:	N/A	N/A	

KO-KURRIKULÊRE (BUITEMUURSE) BEDRYGWIGHEDE / CO-CURRICULAR (EXTRAMURAL) ACTIVITIES

	SPORT	Hoogste span Highest team	Jaar Year		KULTUUR/CULTURE
1				1	
2				2	
3				3	
4				4	

LEIERSKAPPOSISIES: LEADERSHIP POSITIONS:		Jaar Year	
		Jaar Year	
Ander bewese prestasies: Other proven achievement:			

HINDERNISSE TOT LEER/BARRIERS TO LEARNING:

Het die leerder enige hindernisse tot leer? Does the learner have any barriers to learning?	Ja Yes	Nee No	Is mediese/sielkundige verslae beskikbaar? Are medical/psychological reports available?	Ja Yes	Nee No
--	-----------	-----------	--	-----------	-----------

Spesifiseer hindernis:

Specify barrier:

Chroniese medikasie/medikasie vir noodgevalle?

Chronic medication/medication for emergencies?

VAKKE OP DATUM VAN TOELATING (gr. 10-12) SUBJECTS AT DATE OF APPLICATION (gr 10-12)		VAKKE OP DATUM VAN TOELATING (gr. 8-9) SUBJECTS AT DATE OF APPLICATION (gr 8-9)	
1		Huistaal: Home Language:	
2		Addisionele Taal: Additional Language:	
3			
4		KIES EEN VAK/CHOOSE ONE SUBJECT:	
5		DANS/DANCE	MUSIEK/MUSIC
6			
7			

BIOLOGIESE OUER/WETLIKE VOOG 1
BIOLOGICAL PARENT/LEGAL GUARDIAN 1
Verplichtend/Compulsory

Verwantskap tot leerder:	<input type="checkbox"/> Vader Father	<input type="checkbox"/> Moeder Mother
Relation to learner:	<input type="checkbox"/> Stiefvader Stepfather	<input type="checkbox"/> Stiefmoeder Stepmother
	<input type="checkbox"/> Pleegouer Foster parent	<input type="checkbox"/> Ander Other

Leerder woon by hierdie ouer/voog
 Learner lives with this parent/guardian

Ja Yes	Nee No
-----------	-----------

Hierdie ouer/voog ontvang kommunikasie
 This parent/guardian receives communication

Ja Yes	Nee No
-----------	-----------

Titel: _____ Voorletter(s): _____
 Title: _____ Initial(s): _____

Volle name:
 Full names: _____

Van:
 Surname: _____

Voorkeurnaam:
 Preferred name: _____

ID-no.:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 ID nr.: _____

Nasionaliteit:
 Nationality: _____

Huistaal:
 Home language: _____

Huwelikstatus:
 Marital status:

<input type="checkbox"/> Getroud Married	<input type="checkbox"/> Enkellopend Single
<input type="checkbox"/> Vervreem Separated	<input type="checkbox"/> Geskei Divorced
<input type="checkbox"/> Weduwee/Wewenaar Widow/Widower	

Kommunikasietaal:
 Communication Language: _____

Kommunikasie:
 Communication: SMS E-POS
 EMAIL

Selfoonnommer:
 Mobile number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

E-posadres:
 Email address: _____

Woonadres:
 Residential address: _____

Posadres:
 Postal address: _____

Beroepstatus:
 Occupation status:

<input type="checkbox"/> Eie Werkgewer Professioneel Own Employer Professional	<input type="checkbox"/> Deeltyds Part-time
<input type="checkbox"/> Eie Werkgewer Nie-Professioneel Own Employer Non-Professional	<input type="checkbox"/> Huisvrou Housewife
<input type="checkbox"/> Voltyds Full-time	<input type="checkbox"/> Student Student
<input type="checkbox"/> Kontrakwerker Contract worker	<input type="checkbox"/> Tydelik Temporary
<input type="checkbox"/> Pensioenaris Pensioner	<input type="checkbox"/> Werkloos Unemployed

Beroep:
 Occupation: _____

Werkgewer:
 Employer: _____

Werkstelefoonnommer:
 Work telephone number: _____

Werkgeweradres:
 Employer address: _____

Ouerhandtekening:
 Parent signature: _____

BIOLOGIESE OUER/WETLIKE VOOG 2
BIOLOGICAL PARENT/LEGAL GUARDIAN 2
Verpligtend/Compulsory

Verwantskap tot leerder:	<input type="checkbox"/>	Vader Father	<input type="checkbox"/>	Moeder Mother
Relation to learner:	<input type="checkbox"/>	Stiefvader Stepfather	<input type="checkbox"/>	Stiefmoeder Stepmother
	<input type="checkbox"/>	Pleegouer Foster parent	<input type="checkbox"/>	Ander Other

Leerder woon by hierdie ouer/voog
 Learner lives with this parent/guardian

Ja Yes	Nee No
-----------	-----------

Hierdie ouer/voog ontvang kommunikasie
 This parent/guardian receives communication

Ja Yes	Nee No
-----------	-----------

Titel: _____ Voorletter(s): _____
 Title: _____ Initial(s): _____

Volle name:
 Full names: _____

Van:
 Surname: _____

Voorkeurnaam:
 Preferred name: _____

ID-no.:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 ID nr.: _____

Nasionaliteit:
 Nationality: _____

Huistaal:
 Home language: _____

Huwelikstatus:
 Marital status:

<input type="checkbox"/>	Getroud Married	<input type="checkbox"/>	Enkellopend Single
<input type="checkbox"/>	Vervreem Separated	<input type="checkbox"/>	Geskei Divorced
<input type="checkbox"/>	Weduwee/Wewenaar Widow/Widower		

Kommunikasietaal:
 Communication Language: _____

Kommunikasie:
 Communication: SMS E-POS
 EMAIL

Selffoonnommer:
 Mobile number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

E-posadres:
 Email address: _____

Woonadres:
 Residential address: _____

Posadres:
 Postal address: _____

Beroepstatus:
 Occupation status:

<input type="checkbox"/>	Eie Werkgewer Professioneel Own employer Professional	<input type="checkbox"/>	Deeltyds Part-time
<input type="checkbox"/>	Eie Werkgewer Nie-Professioneel Own Employer Non-Professional	<input type="checkbox"/>	Huisvrou Housewife
<input type="checkbox"/>	Voltyds Full-time	<input type="checkbox"/>	Kontrakwerker Contract worker
<input type="checkbox"/>	Pensioenaris Pensioner	<input type="checkbox"/>	Student Student
<input type="checkbox"/>	Tydelik Temporary	<input type="checkbox"/>	Werkloos Unemployed

Beroep:
 Occupation: _____

Werkgewer:
 Employer: _____

Werkstelefoonnommer:
 Work telephone number: _____

Werkgeweradres:
 Employer address: _____

Ouerhandtekening:
 Parent signature: _____

KONTRAK MET SKOOL TEN OPSIGTE VAN BETALING

Ooreenkoms tussen Worcester Gimnasium en _____
t.o.v. die betaling van skoolgeld. (Naam van ouer / voog)

1. Worcester Gimnasium is 'n Artikel 21 Openbare Skool en mag skoolgelde hef volgens die Suid-Afrikaanse Skolewet (Wet No. 84 van 1996) en die National Educating Policy Act (Wet No. 27 van 1996) - National Norms and Standards of School Funding.
2. U is aanspreeklik vir die betaling van die skoolgeld soos bepaal ingevolge Artikel 39 van die Suid-Afrikaanse Skolewet, tensy en tot die mate waartoe u kragtens hierdie Wet van betaling vrygestel is.
3. Ten spyte daarvan dat 'n hof bepaal het dat 'n ander persoon die voorgeskrewe skoolgeld moet betaal, soos vervat kan wees in egskeiding-skikkingsbevele, en/of enige ander gepaste hofbevel, bly dit steeds die verantwoordelikheid van alle persone wat voldoen aan die definisie van "ouer" in die SA Skolewet, om skoolfonds te betaal en alle "ouers" is gesamentlik en afsonderlik teenoor die skool aanspreeklik vir die betaling van alle skoolfonds wat deur die skool gehef is en of sal word ten opsigte van 'n spesifieke leerling.
4. Betaling van skoolgeld aan Worcester Gimnasium sal soos volg geskied (*merk toepaslike blokkie met kruisie*):
 - Eenmalige betaling voor of op die sperdatum soos bepaal tydens die jaarlikse ouervergadering;
 - Afbetaling oor 12 maande; of
 - Ander reëlins sal skriftelik met die skool getref word op my verantwoordelikheid en inisiatief.
5. Ek/Ons is bewus daarvan dat ons kan aansoek doen vir vrystelling van skoolgeld vir 2025/2026 en indien ons van voorneme is om aansoek te doen vir vrystelling, sal die relevante aansoekvorm volledig voltooi word.
6. Indien u wil appelleer teen 'n beslissing van die Beheerliggaam ten opsigte van die vrystelling van u verpligting van skoolgelde, kan u dit doen by die Departementshoof van die Onderwysdepartement, wat te alle tye die bepalinge van bogenoemde Wetgewing sal toepas en verplig sal wees om 'n behoorlike regsproses te volg ten einde die belange van u as ouer en van die Beheerliggaam te beskerm.
7. Indien ek agterstallig is met betaling van skoolgeld, sal ek aanspreeklik wees vir die betaling van die koste aangegaan om dit op 'n prokureur- en kliënteskaal in te vorder.
8. Ek kies hierdie onderstaande adres as my *domicilium citandi et executandi* vir aflewering of betekening van Kennisgewings of pleitstukke.
Woonadres (NIE 'n posbusadres nie): _____

9. Ek/Ons die ouers/voogde van _____ onderneem om my / ons te hou by die ooreenkoms soos hierbo uiteengesit.

Handtekening van Ouer / Voog: _____ Datum: _____

VRYWARING /TOESTEMMING OM AAN ALLE GEORGANISEERDE AKADEMIESE, SPORT- EN KULTUURAKTIWITEITE DEEL TE NEEM

1. Ek, ouer/voog van _____ gee hiermee toestemming dat hy/sy aan alle akademiese, sport- en kultuuraktiwiteite wat deur die skool op 'n georganiseerde wyse aangebied word, mag deelneem, asook om toetse deur die skoolondersteuningspan met die oog op hulpverlening in skoolwerk of identifisering van probleme, te mag aflê.
2. Ek verleen toestemming dat my kind vervoer mag word deur 'n openbare busmaatskappy wat goedgekeur is deur die skoolbestuur. Indien daar slegs 'n klein groepie leerders vervoer moet word, kan ouers/onderwysers met wettige bestuurslisensies gevra word om leerders te vervoer.
3. Ek aanvaar dat alle redelike voorsorg getref sal word vir die veiligheid en welstand van my kind en dat ek verantwoordelik gehou sal word vir die betaling van die mediese en/of hospitaalrekenings indien van toepassing, in geval van besering wat nie aan die growwe nalatigheid van die verantwoordelike personeel toegeskryf kan word nie.
4. Ek dra my magte as ouer/voog oor aan die hoof van die skool of sy verteenwoordiger, indien mediese of chirurgiese behandeling vir my kind nodig mag wees. Sover ek weet, verkeer hy/sy in goeie gesondheid en is hy/sy fisies in staat om aan enige georganiseerde aktiwiteite deel te neem.
5. Ek bevestig dat alle mediese inligting voorsien in die Afdeling: Leerderinligting van hierdie vorm, akkuraat en volledig is. Hierdie inligting mag in enige noodgeval gebruik word.
6. Ek onderneem om die skool in kennis te stel indien enige van bogenoemde inligting verander.
7. Ek onderneem om my kind te ondersteun in die nakoming van die Gedragskode en dissiplinêre stelsel van Worcester Gimnasium soos in die Skoolbeleid vervat. Ek aanvaar dat indien my kind skuldig bevind word aan enige oortreding, hy/sy sy/haar straf moet uitdien. Ek is vertrouwd met die Gedragskode en dissiplinêre stelsel en beskou dit as bindend op elke ingeskrewe leerder.

Handtekening van Ouer / Voog: _____ Datum: _____

CONTRACT WITH SCHOOL WITH REGARDS TO PAYMENT

Agreement between Worcester Gymnasium and _____
with regards to the payment of school fees. (Name of parent/ guardian)

1. Worcester Gymnasium is a Section 21 Public School and may raise school fees in terms of the South African School Act (Act No. 84 of 1996) and the National Educating Policy Act (Act No. 27 of 1996) - National Norms and Standards of School Funding.
2. As a parent/guardian you are liable to pay school fees determined in terms of Section 39 of the South African Schools Act, unless or to the extent that you have been exempted from payment in terms of the said Act.
3. Even though a court has determined that another person is liable to pay the prescribed school fees, as may be included in divorce settlements orders, and/or any other appropriate court order, it remains the responsibility of all persons who meet the definition of "parent" in the South African Schools Act, to pay school fees and all "parents" are jointly and severally liable for the payment of all school fees that are charged or will be charged by the school in respect of a particular learner.
4. Payment of school fees to Worcester Gymnasium will be made as follows (Mark the applicable block with a cross):
 - Full payment (Once-off) on or before the last date as determined during the annual parent meeting;
 - Payment over 12 months; or
 - Alternative arrangements will be made with the School in writing at my own responsibility and initiative.
5. I/We are aware of the application process for exemption of school fees for 2025/2026 and if exemption is required, we will complete the relevant application form.
6. Should you wish to appeal against a decision of the Governing Body regarding the exemption from payment of school fees, you can do so at the Head of Department from the Department of Education who will at all times ensure compliance to the aforementioned Acts and are obliged to follow proper legal procedures to protect the rights of both you as a parent and that of the School Governing Body.
7. Should payments of school fees be in arrears, I shall be accountable for the payment of fees that may arise in the effort to collect the fees on an attorney and client scale.
8. I choose the following address as my *domicilium citandi et executandi* for delivery or serving of any notices or pleadings.

Residential address (NOT a postal address): _____

9. I/We the parents/guardian of _____ undertake to honour the agreement as set out above.

Signature of Parent/Guardian: _____ Date: _____

PERMISSION / CONSENT TO TAKE PART IN ALL ORGANISED ACADEMIC, SPORT AND CULTURE ACTIVITIES

1. I, parent/guardian of _____ hereby give permission that he/she may participate in all academic, sport and culture activities presented by the school in an organised manner, and to participate in tests conducted by the school support team with the objective of improvement in school work and to identify other problems.
2. I grant permission that my child may be transported by a public bus company approved by the school management. If there is only a small group of learners that needs to be transported, parents/teachers with valid drivers' licenses may be asked to transport them.
3. I accept that all reasonable precautions will be taken for the safety and well-being of my child and that I will be held responsible for the payment of the medical and/or hospital fees if enforced upon, in case of an injury which cannot be ascribed to the responsible personnel's coarse negligence.
4. I hereby delegate my powers as parent /guardian to the Principal of the school or representative if medical or surgical treatment may be needed for my child. As far as I know, he/she is physically able to participate in any organised activities and resides in good health.
5. I confirm that all medical information supplied in the Learner Information section of this form is accurate and complete. This information may be used in case of an emergency.
6. I undertake to inform the school if any of the above information may change.
7. I undertake to support my child to obey the Code of Conduct and the disciplinary system of Worcester Gymnasium as included in the School Policy. I accept that if my child is found guilty of any misdemeanor, he/she must accept his/her punishment and fulfill the requirements of such punishment. I am acquainted with the Code of Conduct and disciplinary system and I accept these as binding on every enrolled learner.

Signature of Parent / Guardian: _____ Date: _____

**VRYWARINGSVORM MET BETREKKING TOT
LEERDERFOTO'S/-BEELDMATERIAAL/-VIDEO'S**

**RELEASE FORM IN RESPECT OF
LEARNER PHOTOS/IMAGES/VIDEOS**

Ek, _____,
(skryf asseblief volle name netjies in blokletters), verleen hiermee toestemming aan Worcester Gimnasium om foto's/beeldmateriaal/video's van die kind(ers) hieronder te vertoon as deel van:

- 'n demonstrasie/projek/aktiwiteit in die loop van klaskameronderrig;
- 'n voorbeeldprojek/-aktiwiteit op CD wat vir gebruik in opvoedkundige werksessies, klaskamers, advertensies, ensovoorts deur die skool geskep is;
- die skool se webblaaie en sosialemediaplatforms (waaronder Facebook en Twitter);
- voorbeelde wat aan programuitgewers gegee, of wedstrydinskrywings wat by borge ingedien word;
- video-opnames vir 'n program in verband met die skool wat op 'n televisiestasie uitgesaai sal word; en/of
- enige gedrukte publikasie, wat insluit, dog nie beperk is nie tot, koerante, tydskrifte, jaarboeke, ensovoorts.

Deur hierdie toestemming te verleen, begryp ek dat die skool foto's/beeldmateriaal/video's van die kind(ers) kan gebruik vir doeleindes soos om prestasies te vier en onderwysgeleenthede bekend te maak, soos wat die skoolbeheerstruktuur en die skoolhoof goeddink, en dat sodanige gebruik vertoning in die skoolfotogalery kan insluit.

Ek verstaan voorts dat hoewel die skool wat met die foto's/beeldmateriaal/video's verbind word, geïdentifiseer sal word, en volwassenes wat in foto's/beeldmateriaal/video's verskyn by die naam genoem mag word, geen persoonlik identifiseerbare inligting van die kind(ers), buiten vir die naam/name van die kind(ers), saam met enige foto/beeld/video gebruik sal word nie.

Ek onderteken hierdie vrywaringsvorm in die wete dat enige foto's/beeldmateriaal/video's wat op die skool se webtuiste gepubliseer word, deur verskeie nuusorganisasies, waaronder gedrukte, elektroniese en uitsaaimedia, bekom en gereproduseer kan word, en daarom vrywaar ek die skool van enige aanspreeklikheid wat kan ontstaan uit die gebruik van foto's/beeldmateriaal/video's van die kind(ers) in skoolwebpublikasies.

Daarbenewens begryp ek dat daar moontlike gevare bestaan in verband met die publikasie van foto's, beeldmateriaal en video's op 'n webtuiste, aangesien wêreldwye toegang tot die internet dit onmoontlik maak om te beheer wie toegang tot die inligting verkry.

Ek verstaan ook dat indien ek hierdie ooreenkoms wil herroep, ek dit in enige stadium kan doen deur 'n brief aan die skoolhoof te stuur.

Hereby, I, _____,
(please neatly print full name) grant permission to Worcester Gymnasium to display photos/images/videos of the child(ren) indicated below as part of:

- a demonstration/project/activity in the course of classroom teaching;
- a sample project/activity on CD created by the school for use in educational workshops, classrooms, advertisements, etc.;
- the school's webpages and social media platforms (including Facebook and Twitter);
- samples given to programme publishers, or contest entries submitted to sponsors;
- video recordings to appear in a school-related programme broadcast on a television station; and/or
- any printed publication, including, though not limited to, newspapers, magazines, yearbooks etc.

In granting this permission, I understand that the school may use photos/images/videos of the child(ren) for purposes such as celebrating achievements and publicising education events, as deemed appropriate by the school governance structure and the principal, and that such use may include display in the school photo gallery.

I further understand that although the school associated with the photos/images/videos will be identified, and adults appearing in photos/images/videos may be named, the personally identifiable information of the child(ren), except for the name (s) of the child(ren), will not be used with any photo/image/video.

I am signing this release form in the knowledge that any photos/images/videos posted on the school's website can be downloaded and reproduced by various news organisations, including print, electronic and broadcast media, and I therefore release the school from any liability arising from the use of photos/images/videos of the child(ren) in school web postings.

Additionally, I understand that there are potential dangers associated with the posting of photos images and videos on a website, since global access to the internet does not allow for control over who accesses information.

I further understand that if I wish to rescind this agreement, I may do so at any time by sending a letter to the principal of the school.

Naam en van: Leerder:

Naam en van: Ouer/voog:

Adres: _____

Telefoon: _____

Handtekening van ouer/voog:*

Datum: _____

*Leerders van 18 jaar of ouer mag hierdie vrywaringsvorm self onderteken.

Name and surname: Learner:

Name and surname: Parent/guardian:

Address: _____

Telephone: _____

Signature of parent/guardian:*

Date: _____

*Learners 18 years of age or older may sign this release form themselves.

PRIVAATHEID EN VERTROULIKHEID VAN d6-INLIGTING

Volgens die Wet op Beskerming van Persoonlike Inligting (Wet nr 4 van 2013) en die Wet op Beskerming van Inligting, (Wet nr 84 van 1982), die volgende:

- * Ek verstaan dat alle inligting wat ek voorsien, vertroulik is.
- * Ek is daarvan bewus dat my inligting slegs voorsien word vir die volgende doeleindes: onderwys, administrasie en verslaggewing van Worcester Gimnasium. Die inligting sal slegs gebruik word vir ondersteuning en verslaggewing soos bepaal word deur die volgende wette en wetlike instansies: Die Nasionale Onderwysbeleidswet, 1996 (Wet nr 27 van 1996), Die Suid-Afrikaanse Skolewet, 1996 (Wet nr. 84 van 1996) en die Nasionale Onderwysbeleid.
- * Die skool sal onder geen omstandighede enige persoonlike inligting bekendmaak, kopieër, vrystel, uitleen, hersien, verander of vernietig nie, behalwe indien dit gemagtig word binne die raamwerk van die skool se pligte.

Ouer / voog se voorletters en van

Ouer / voog se handtekening

Datum: _____

PRIVACY AND CONFIDENTIALITY OF d6 INFORMATION

In terms of the Protection of Personal Information (Act no. 4 of 2013) and Protection of Information Act, (Act No. 84 of 1982):

- * I understand that all personal information is confidential.
- * I am aware that my information is provided solely for the education, administration and reporting purposes of Worcester Gymnasium. The information will be used for reporting and support purposes by die school as mandated by National Education Policy Act, 1996 (Act No. 27 of 1996), South African Schools Act, 1996 (Act No. 84 of 1996) and the National Education Policy.
- * The school will not in any way divulge, copy, release, sell, loan, review, alter or destroy any confidential information except as properly authorised within the scope of their duties.

Parent / Guardian's initials and surname

Parent / Guardian's signature

Date : _____