



Agreement between

**Tjokkerjøl Playgroup**

and

(Hereafter known as “the Parent”)

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As it is the wish of the parent that his/her child is tended to daily by Tjokkerjøl Playgroup; and as it is the wish of Tjokkerjøl Playgroup to care for your child at a determined tariff.

The parties, therefore, agree as follows:

**Tjokkerjøl Playgroup undertakes:**

1. To care for the child named \_\_\_\_\_
2. To provide the child with balanced meals. Babies/Toddlers receive breakfast and a snack. Parents are requested to provide lunch if the option without lunch was selected.
3. To provide an adequate security area where the child’s activities can take place.
4. To present the child with a program that is stimulating in nature.
5. To contact the parent telephonically in the case of illness/injury to the child.
6. To only hand the child over to the parent or person named in Appendix 1.

**The Parent undertakes:**

1. To fully complete this agreement and Appendix 1 and submit all documents in this pack to Tjokkerjøl Playgroup.
2. To strictly adhere to the school times 07h00-17h30.  
**Initial:** \_\_\_\_\_
3. To provide any prescribed items or special dietary nutrients, such as formula milk, two sets of clean clothes disposable diapers, and/or bedding as requested by Tjokkerjøl Playgroup.
4. To comply with the legal prescriptions regarding the child's medication and vaccinations.
5. To provide children that have non-contagious diseases with medication as well as authorize Tjokkerjøl Playgroup to administer said medication.
6. To, in the event of infectious diseases or any illness that causes the child's absence, make alternative arrangements for the child at the parent's expense, and to provide Tjokkerjøl Playgroup with a medical certificate, before the child is allowed to resume at Tjokkerjøl Playgroup.  
**Initial:** \_\_\_\_\_
7. To notify Tjokkerjøl Playgroup as soon as possible of such a disease or illness mentioned in no.6 above.  
**Initial:** \_\_\_\_\_
8. To ensure that all gates are closed. **Initial:** \_\_\_\_\_

**Fees:**

1. A registration fee of **R1500** (one thousand five hundred rand) will be payable to Tjokkerjøl Playgroup at the signing of the agreement. These fees are not refundable.
2. A monthly bill will be sent to the person responsible for payment, at the beginning of each month, via email. We work on an upfront payment system. School fees are due no later than the 4<sup>th</sup> of each for the month of education. *Example: January school fees are payable no later than the 4<sup>th</sup> of January.*

**Account Details:**

**Tjokkerjøl (PTY) Ltd**

**FNB Gold business account**

**Account No: 62825563241**

**Branch No: Centurion 250655**

**Ref: School Account No.**

3. If the parent wishes to make a special financial agreement, the request must be in writing and signed by the person responsible for payment. If the parent repeatedly fails to effect payment on or before the 4<sup>th</sup> (fourth) day of each month, the agreement between Tjokkerjøl Playgroup and the parents whosigned the agreement will be terminated immediately and the child will no longer form a part of Tjokkerjøl Playgroup.

4. The parent agrees that if he/she fails to affect any payment on or before the due date, and Tjokkerjol Playgroup hands the outstanding amount to an attorney for collection, the parent will be liable for all costs on an attorney and client scale, collection charges as well as tracking fees if any.
  
5. If Tjokkerjol Playgroup aims to increase the tariffs as set out in this agreement, they shall provide the parent with written notice 2 (two) months before the higher tariff will take effect, with the proviso that Tjokkerjol Playgroup will not be entitled to increase such tariffs more than once per calendar year.
  
6. Tjokkerjol Playgroup and Aftercare is affiliated with TPN Credit Bureau, a registered credit bureau, all account payment profiles, patterns, and behavior are recorded monthly with the credit bureau for the purposes of the National Credit Act. Both parents are liable for the school fee.

**CONSENT CLAUSE:** (Future consumer/debtor)  
Application form and/or Contractual Agreement

The consumer/debtor consents to and authorises Tjokkerjol Playgroup and Aftercare the supplier, service, and/or credit provider, as the case may be, to:

contact, request and obtain information at any time from any supplier, service or credit provider (or potential credit provider) or registered credit bureau in order to assess the behavior, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of the consumer/debtor; and

provide information about the behavior, profile, payment patterns, indebtedness, whereabouts, and creditworthiness of the consumer/debtor to any registered credit bureau or to any supplier, service, or credit provider (or potential credit provider) seeking a trade reference regarding the consumer's/debtor's dealings with the supplier, service and/or credit provider.

**Initial:** \_\_\_\_\_

<b>Monthly School Fee 2025</b>						
<b>Chose one of the following option:</b>						
<b>Playgroup:</b>				<b>Aftercare:</b>		
<b>5 DAYS – FULL DAY</b>			<b>3 DAYS – FULL DAY</b>			With light lunch, extracullicar activities, holidaycare
With meals	R3 900.00		With meals	R2 500.00		
Without meals	R3 550.00		Without meals	R2 200.00		
<b>5 DAYS – HALF DAY</b>			<b>3 DAYS – HALF DAY</b>			Without light lunch, extracullicar activities, holidaycare
With meals	R3 000.00		With meals	R1 900.00		
Without meals	R2 650.00		Without meals	R1 600.00		

R \_\_\_\_\_ per month

**Initial:** \_\_\_\_\_



Initial: Mother:

Father:

Guardian:

**Leave:**

1. We are closed on public holidays as well as on the one-day school holidays that fall on Friday or Monday, accompanied by a public holiday that falls on a Thursday or Tuesday. The information is available on our important dates, we will inform you of these days in advance. The school only closes in December.

**Fines:**

1. A fine of R20 (twenty rand) for every 15 (fifteen) minutes that your child is collected late, will be charged.
2. Fines will be added at the end of every month.

**Consent:**

1. The parent hereby gives consent that Tjokkerjol Playgroup may take the child to the nearest available medical practitioner or hospital and that the child may be afforded medical treatment at the expense of the parent if the parent cannot be reached telephonically by Tjokkerjol Playgroup.
2. The child may be collected by any parent named in Appendix 1, unless Tjokkerjol Playgroup has a court order that states otherwise. When the child is collected by the parent, an identification document such as a driver's license or green ID document will be requested to ensure that the person has permission to collect the child.

**Notice:**

1. If you would like to withdraw your child/ren from Tjokkerjol Playgroup, please provide one month's written notice. This applies to the months from January to October. If notice is not given on the first of the month, it will take effect on the first of the following month regardless if the child attend school or not. Please send your notice via email to [tjokkerjol@gmail.com](mailto:tjokkerjol@gmail.com).

**NB! Please note that November and December will NOT be accepted as notice months. The monthly fees for these months will still be charged and must be paid. If you wish to provide notice to not continue with Tjokkerjol Playgroup in the new year, please ensure that you do so by November 1; this requires two full calendar months' notice.**

2. Outstanding fees that remain unpaid will be referred to collections, and any associated legal costs will be the responsibility of the parent.

**Initial:** \_\_\_\_\_

**Clothing:**

1. The parent will ensure that all clothing and/or personal items of the child are labelled clearly and legibly. If the parent fails to comply with the condition set out above, Tjokkerjol Playgroup will not be held liable for the loss of clothing and/or personal items.

**Legal Liability:**

1. Tjokkerjol Playgroup will not be held liable for any damage, including consequential damages suffered by the parent, child, or any other person, arising out of any event associated with the Tjokkerjol/child relationship.

**Re-registration:**

1. If you re-register your child/ren for the coming year/years, all terms and conditions of this agreement as signed by the responsible and liable Parties will still be binding between Parties.

**Full agreement:**

1. The parties place on record that this agreement, together with Appendix 1, (which is considered as an integral part of this agreement between the parties), will constitute the entire agreement between the parties and that no other agreement would be in force unless it is in writing by all parties concerned, as well as signed by all parties. No warranties, undertakings or representations other than those contained in this agreement is given or made by any of the parties.

SIGNED AT \_\_\_\_\_ ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_

\_\_\_\_\_  
R. ALBERTS (on behalf of Tjokkerjøl Playgroup)

\_\_\_\_\_  
WITNESS

SIGNED AT \_\_\_\_\_ ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_

\_\_\_\_\_  
FATHER/GUARDIAN

\_\_\_\_\_  
MOTHER/GUARDIAN

\_\_\_\_\_  
WITNESS



Initial: Mother:

Father:

Guardian:

# **Registration form 2025**

## **Appendix 1**

Information of the child being enrolled:

Full Names of child	
Surname of child	
Nickname of child	
Date of birth of child	
First day the child will join Tjokkerjøl Playgroup	

## **Parent's Information:**

(both parents are responsible for the account)

<b>Information</b>	<b>Father's Details</b>	<b>Mother's Details</b>
Full Names		
Nickname		
Surname		
ID Number		
Home Address		
Postal Address		
Home Number		
Cell Phone Number		
Employer		
Work Number		
Email Address		
Marital status of parents		
Both parents are responsible for the account		
<b>Please sign:</b>		



**In case of emergency:**

Contact person(s) if parents are not available		
	Name & Surname	
	Address	
	Contact No	
	Name & Surname	
	Address	
	Contact No	

Other persons that have permission to pick up the child at Tjokkerjol Playgroup:			
Name & Surname	Relationship with Child	Contact Number	ID Number

Medical Aid Details	
Medical Aid Name	
Medical Aid Plan	
Medical Aid Number	
House Doctor Details	
Doctor's Name	
Contact Number	

## Medical History of the child

- Is there any information about your child's general health or physical condition you want to bring to my attention?

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- Did your child recently undergo an operation? If yes, what was the date of the operation?

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- Are there any serious illness(es) that your child has had recently that I should know of?

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- Is your child allergic to anything? If yes, how is the allergy treated?

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- Did your child receive all his/her immunizations up to date? [Yes / No]

**Please send** a copy of your child's immunizations chart together with the registration form.

- Which type of medication do you give to your child if he/she gets a fever? / How high should your child's fever be before administering this medication?

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- What is the dosage of the medication mentioned above? \_\_\_\_\_ml.

**Please send** a full bottle of the above-mentioned medication, for emergency purposes.

## Indemnity

The child's details:

Surname: \_\_\_\_\_

Initials: \_\_\_\_\_

Nickname: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Disclaimer:

I, \_\_\_\_\_ the undersigned Mother/Father/Guardian of indemnify ROCHELLE ALBERTS, TJOKKERJOL PLAYGROUP, AND PERSONNEL of any financial, judicial, medical or any other claim because of any accident, incident, injury, and/or death regarding my child while in the care of the persons named.

SIGNED AT \_\_\_\_\_ ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
MOTHER/GUARDIAN

\_\_\_\_\_  
FATHER/GUARDIAN

## Social Media Consent

We \_\_\_\_\_

(Full name and surname of parents / guardian of

\_\_\_\_\_  
(Full name of child)

Give hereby:

Consent

Do not Consent

that any photos / videos taken at Tjokkerjol Playgroup may be used for our Facebook page, WhatsApp group and Website.

Signed at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

\_\_\_\_\_  
Signature of Father/Guardian

\_\_\_\_\_  
Signature of Mother/Guardian