

**HILLCREST COLLEGE  
APPLICATION FOR ENROLMENT**

**P O Box 840 MUTARE**

**TEL/FAX: 60773**

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(To be completed by the person who has legal guardianship of child)

Please complete ALL SECTIONS and use BLOCK CAPITALS where appropriate.

1. PUPILS SURNAME: ..... FIRST NAMES .....
2. Date of Birth ..... (please attach photocopy of birth certificate)
3. Male or Female .....
4. Place required in Form ..... in (Year)..... (please attach copy of the most recent School report)
5. Religion .....
6. Is the child proficient in the English language? ..... Language spoken at home .....
7. Nature of any mental or physical handicap .....  
..... (Please attach psychologist's, doctor's report) .....
8. Schools previously attended:  
School.....Grd/Form     Dates  
..... From..... to.....  
..... From..... to.....  
..... From..... to.....  
..... From..... to.....
9. Details of brothers/sisters attending Hillcrest College/Preparatory School  
Surnames..... First Names .....
- Surnames..... First Names .....
10. Name of legal guardian.....
11. Relationship to child .....
12. Residential address .....
13. Residential phone no. ....Name of family doctor .....
14. Name of employers .....
15. Address of employers .....
16. Occupation ..... Business phone no. ....
17. Any other relevant information you may wish to add  
.....
18. Person responsible for fees (if different from 11 above)  
Name: ..... Address .....

DECLARATION BY PERSON WHO HAS LEGAL GUARDIANSHIP OF THE CHILD

1. I .....(Full Name) declare that the information given in this application for enrolment and signed by me below is true and correct.
2. I agree that my son/daughter .....(name of Child) shall observe and be subjected to the regulations, rules and discipline of the College and shall wear the required school uniform.
3. I accept full responsibility for payment of all the prescribed fees and accept that my son/daughter will be barred from attending this school should fee deadlines (first day of term unless prior arrangements made) not be met. I undertake to pay interest or all outstanding fees owed at the rate prevailing at the time.
4. I undertake and agree that in the event of my child/children being removed by me from Hillcrest Schools (Private) Limited ('the Company), I shall be liable to the Company to pay no less than one term's fees for each child, should one term's full notice not be given to the Company.
5. I understand that in the case of illness/accident the Head of School will get in touch with me, but in the event of it nor being possible I authorise the Headmaster to act on my behalf in his discretion and I agree to pay all medical fees/expenses incurred by the Head in respect of my child.
6. I accept that my child will be required to take part in the full range of College activities – academic, cultural, sporting and social. This will include participating in events and away sports fixtures outside Mutare as well as any camps or courses.
7. I undertake to inform the College of any change of address.

DATE:..... SIGNATURE .....

PLEASE NOTE

Children will be accepted into Form 1 in the year they turn 13 or 14; into Form 2 the year they turn 14 or 15; into Form 3 the year they turn 15 or 16; and into Form 4 the year they turn 16 or 17.

This application does NOT automatically entitle your child to enrolment at this school.

A non-refundable application fee of \$50.00 for day school and \$100.00 for boarding per child is payable on presentation of the application form. A separate application form needs to be completed

The 1<sup>st</sup> term's fee of \$..... will be payable before your child is admitted into the school.

Please also note that boarding will be provided only if;

- a) The school has made a definite offer of enrolment for the child.
- b) There is a vacancy in the hostel.
- c) Such conditions as are laid down by the Hostel Administrator are met.