

*Greatness by Choice...*



★ Pre-Primary ★ Primary

**APPLICATION FOR ADMISSION**





# St Lieutenant Royal House Schools

## APPLICATION FOR ADMISSION

MONTH & YEAR APPLIED FOR \_\_\_\_\_

➔ Grade Applied for

GRADE

R	1	2	3	4	5	6	7
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➔ **MOST IMPORTANT**

This Application for Admission will only be processed if ALL fields are completed legibly, are signed and All relevant supporting documents are attached.

### REQUIRED SUPPORTING FORMS


CEMIS Transfer Document once available  
 Copy of Learner's FINAL Progress Report once available  
 Copy of Learner's latest Progress Report  
 Copy of Learner's Birth Certificate / ID Document  
 Copy of Learner's Vaccination Records if available  
 Copy of Learner's Resident / Study Permit, if Foreign

### DOCUMENTS, COMPLETED SECTIONS


Copy of Parents' / Legal Guardians' ID Documents  
 Completed Aftercare Application if applicable  
 Completed & Signed Debit Order Form  
 Subject  
 Sections 1 – 14 Completed & Signed

TWO RECENT  
 COLOUR PHOTOS  
 OF LEARNER  
 (ID SIZE)

### FOR OFFICE USE

INTERVIEW DATE _____
NOTES _____
_____
_____
_____

APPROVED _____
DATE _____
COMMENCEMENT _____
DATE _____
GROUP/ GRADE _____

## SECTION 1: LEARNERS PERSONAL DETAILS

SURNAME \_\_\_\_\_

FULL NAMES AS ON BIRTH CERTIFICATE / ID DOCUMENT \_\_\_\_\_

PREFERRED NAME \_\_\_\_\_

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

IDENTITY NUMBER

DATE OF BIRTH \_\_\_\_\_

AGE \_\_\_\_\_

GENDER    MALE    FEMALE

HOME & OTHER SPOKEN LANGUAGE/S

HOME \_\_\_\_\_

OTHER \_\_\_\_\_

LANGUAGE OF LEARNING & TEACHING

FIRST \_\_\_\_\_

SECOND \_\_\_\_\_

NUMBER OF CHILDREN IN FAMILY \_\_\_\_\_

POSITION OF LEARNERS IN FAMILY \_\_\_\_\_

NATIONALITY \_\_\_\_\_

COUNTRY OF ORIGIN \_\_\_\_\_

DATE OF IMMIGRATION \_\_\_\_\_

### RACE

ASIAN

AFRICAN

COLOURED

INDIAN

WHITE

OTHER

## SECTION 2: LEARNER'S EDUCATION DETAILS

CURRENT SCHOOL \_\_\_\_\_

PREVIOUS SCHOOL \_\_\_\_\_

ADDRESS \_\_\_\_\_

PREVIOUS SCHOOL \_\_\_\_\_

CODE \_\_\_\_\_

CODE \_\_\_\_\_

TEL NO \_\_\_\_\_

TEL NO \_\_\_\_\_

PRINCIPAL \_\_\_\_\_

PRINCIPAL \_\_\_\_\_

LAST GRADE PASSED \_\_\_\_\_ YEAR \_\_\_\_\_ GRADE/S REPEATED \_\_\_\_\_



HAS ADMISSION TO ANY OTHER SCHOOL/S EVER BEEN REFUSED? IF YES, PLEASE STATE REASON.

YES	NO
-----	----

REASON \_\_\_\_\_

ACADEMIC ACHIEVEMENTS
_____
_____
_____

EXTRACURRICULAR ACHIEVEMENTS
_____
_____
_____

OTHER ACHIEVEMENTS
_____
_____
_____

### SECTION 3: LEARNERS MEDICAL DETAILS - CONTINUED

BLOOD TYPE

O+	O-	A+	A-	AB+	AB-	B+	B-	UNKNOWN
----	----	----	----	-----	-----	----	----	---------

FAMILY DOCTOR

NAME \_\_\_\_\_ TEL NO \_\_\_\_\_

ADDRESS \_\_\_\_\_

MEDICAL AID

NAME \_\_\_\_\_ NUMBER \_\_\_\_\_

MAIN MEMBER \_\_\_\_\_ ID NO \_\_\_\_\_

OPTIONS \_\_\_\_\_

HAS THE LEARNER RECEIVED ALL THE NECESSARY IMMUNISATIONS? IF NO, PLEASE STATE

YES	NO	REASON.
-----	----	---------


ASTHMA

CHICKEN POX

DIABETES

DIPHTHERIA


ENTERIC FEVER

GERMAN MEASLES

HEPATITIS

MALARIA


MEASLES

MUMPS

POLIO

RHEUMATIC FEVER


SCARLET FEVER

TICKBITE FEVER

TYPHOID FEVER

WHOOPING COUGH

DOES THE LEARNER SUFFER FROM ANY ALLERGIES?

YES	NO
-----	----

IF YES, PLEASE GIVE DETAILS. \_\_\_\_\_

\_\_\_\_\_

IS THE LEARNER RECEIVING MEDICAL TREATMENT FOR ANY CONDITION?

YES

NO

IF YES, PLEASE GIVE DETAILS. \_\_\_\_\_  
\_\_\_\_\_

IS OR HAS THE LEARNERS SUFFERED FROM OR RECEIVED TREATMENT FOR ANY PSYCHOLOGICAL  
OR EMOTIONAL UPSET?

YES

NO

IF YES, PLEASE GIVES DETAILS. \_\_\_\_\_  
\_\_\_\_\_

HAS THE LEARNER HAD ANY OPERATIONS?

YES

NO

IF YES, PLEASE GIVE DETAILS. \_\_\_\_\_  
\_\_\_\_\_

PLEASE SPECIFY ANY OTHER RELEVANT MEDICAL DETAILS. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SECTION 3: LEARNER'S MEDICAL DETAILS – CONSENT

IN A CRITICAL MEDICAL SITUATION, PLEASE BEAR THAT THERE MAY NOT BE TIME TO REFER TO THE LEARNER'S RECORDS.  
THE SCHOOL THEREFORE RESERVES THE RIGHT TO UTILISE THE QUICKEST MEDICAL SERVICE AVAILABLE.

I, \_\_\_\_\_ BEING THE PARENT / LEGAL GUARDIAN OF \_\_\_\_\_

HEREBY AGREE THAT A MEDICAL PRACTITIONER MAY PROVIDE EMERGENCY TREATMENT AS MAY BE NECESSARY.

SIGNATURE OF PARENT / LEGAL GUARDIAN \_\_\_\_\_

### SECTION 4: DETAILS OF FATHER / STEPFATHER / LEGAL GUARDIAN

COMPLETE ONLY IF NOT THE ACCOUNT HOLDER. REFER TO SECTION 8.

\_\_\_\_\_  
SURNAME FULL NAMES AS IN ID DOCUMENT

MR	MRS	MS	MISS	DR	REV	PROF	OTHER	
----	-----	----	------	----	-----	------	-------	--

IDENTITY NUMBER

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

RELATIONSHIP \_\_\_\_\_

MARITAL STATUS \_\_\_\_\_

OCCUPATION \_\_\_\_\_

EMPLOYER \_\_\_\_\_

RESIDENTIAL ADDRESS

WORK ADDRESS

POSTAL ADDRESS

_____	_____	_____
_____	_____	_____
_____	_____	_____

TEL HOME \_\_\_\_\_

TEL WORK \_\_\_\_\_

CELL \_\_\_\_\_

EMAIL ADDRESS (PLEASE WRITE LEGIBLY) \_\_\_\_\_

PARENTAL STATUS

LEARNER LIVING WITH PARENT	LEARNER'S LEGAL GUARDIAN	ACCESS RIGHTS TO LEARNER	ACCESS RIGHTS IN AN EMERGENCY ONLY
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## SECTION 5: DETAILS OF MOTHER / STEPMOTHER / LEGAL GUARDIAN

COMPLETE ONLY IF **NOT** THE ACCOUNT HOLDER. REFER TO SECTION 8.

SURNAME

FULL NAMES AS IN ID DOCUMENT

DESIGNATION

MR	MRS	MS	MISS	DR	REV	PROF	OTHER	
----	-----	----	------	----	-----	------	-------	--

IDENTITY NUMBER

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

RELATIONSHIP \_\_\_\_\_

MARITAL STATUS \_\_\_\_\_

OCCUPATION \_\_\_\_\_

EMPLOYER \_\_\_\_\_



RESIDENTIAL ADDRESS

WORK ADDRESS

POSTER ADDRESS

_____	_____	_____
_____	_____	_____
_____	_____	_____

TEL H \_\_\_\_\_ TEL W \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL ADDRESS (PLEASE WRITE LEGIBLY) \_\_\_\_\_

PARENTAL STATUS

LEARNER LIVING WITH PARENT/S	LEARNER'S LEGAL GUARDIAN	ACCESS RIGHTS TO LEARNER	ACCESS RIGHTS IN AN EMERGENCY ONLY
_____	_____	_____	_____

## SECTION 6: DETAILS OF ANOTHER CONTACT IN THE CASE OF AN EMERGENCY

SURNAME

FULL NAMES

RELATIONSHIP

TEL H \_\_\_\_\_ TEL W \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL ADDRESS (PLEASE WRITE LEGIBLY) \_\_\_\_\_

## SECTION 7: DECLARATION OF PARENTS/ LEGAL GUARDIANS

We the undersigned \_\_\_\_\_, hereby certify that the information given by us in this application is complete and accurate. We also agree to the conditions as set out herein.

We accept that the School is based on Christian principles and undertake this will not be undermined.

We understand that the prescribed number of learners per class may be exceeded through the placing of a current learner that has to repeat a grade.

This Application for Admission will be reconsidered in the class where important relevant information, which should be brought to the School's attention, is withheld.

We have read the Code of Conduct and Dress Code and will accept an offer of placement for our child at the School in accordance with the terms and conditions as set out therein. These documents, as amended from time to time, are available from the school admin office.

NB: The signatures of both parents / or legal guardians are required where applicable.

\_\_\_\_\_  
SIGNATURE OF FATHER / STEPFATHER / LEGAL GUARDIAN

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF MOTHER / STEPMOTHER / LEGAL GUARDIAN

\_\_\_\_\_  
DATE

## SECTION 8: DETAILS OF ACCOUNT HOLDER

SURNAME \_\_\_\_\_

FULL NAMES AS IN ID DOCUMENT \_\_\_\_\_

DESIGNATION

MR	MRS	MS	MISS	DR	REV	PROF	OTHER	
----	-----	----	------	----	-----	------	-------	--

RELATIONSHIP \_\_\_\_\_

MARITAL STATUS \_\_\_\_\_

OCCUPATION \_\_\_\_\_

EMPLOYER \_\_\_\_\_

RESIDENTIAL ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WORK ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

POSTAL ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TEL H \_\_\_\_\_

TEL W \_\_\_\_\_

CELL \_\_\_\_\_

E-MAIL ADDRESS (PLEASE WRITE LEGIBLY) \_\_\_\_\_

PARENTAL STATUS

DETAILS OF

LEARNER LIVING WITH  
PARENT/S

LEARNER'S LEGAL  
GUARDIAN

ACCESS RIGHT TO  
LEARNER

ACCESS RIGHTS IN AN  
EMERGENCY ONLY

CHILDREN IN YOUR CARE WHO ARE CURRENTLY AT THIS SCHOOL

1 NAME \_\_\_\_\_ GR \_\_\_\_\_ 2 NAME \_\_\_\_\_ GR \_\_\_\_\_

3 NAME \_\_\_\_\_ GR \_\_\_\_\_ 4 NAME \_\_\_\_\_ GR \_\_\_\_\_



PAYMENT OPTION

MONTHLY DEBIT ORDER

ANNUALLY IN ADVANCE BY ELECTRONIC FUNDS

TRANSFER OR CASH DEPOSIT AT THE BANK

## SECTION 9: DECLARATION OF ACCOUNT HOLDER

We the undersigned, \_\_\_\_\_, hereby certify that the information given by the Account Holder in this Admission is complete and accurate.

We accept joint and several liability to St Lieutenant Royal House Schools (Pty) Ltd for the due and punctual payment of the once-off, non-refundable enrolment fee, school fees and any other amounts which may become due and payable to the School or in respect of participation in or attendance of any extracurricular activity.

We accept the Financial Terms and Conditions of which a copy has been kept.

NB: The signatures of the account holder and that of the 2<sup>nd</sup> parent / a parent / legal guardian / are required if applicable.

\_\_\_\_\_  
SIGNATURE OF ACCOUNT HOLDER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF 2<sup>ND</sup> PARENT / A PARENT / LEGAL GUARDIAN

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF AN AUTHORISED SCHOOL REPRESENTATIVE

\_\_\_\_\_  
DATE

## SECTION 10: FINANCIAL TERMS AND CONDITIONS

### 1 ACCEPTANCE OF LIABILITY

1.1 The person responsible for the account ( hereafter the Account Holder) as set out in the standard Application for Admission ( hereafter the Application ) herewith assumes liability for the account, alternatively binds him - / herself as co- debtor and surety for payment of all fees to the School.

1.2 The legal guardian, as described in the application, binds him-/herself as co-debtor and surety for payment of all fees to the school.

### 2. TERMS OF PAYMENT

2.1 It is recorded that fees are determined at the beginning of the year and that the Account Holder is informed of the result in writing.

2.2 The Account Holder shall immediately inform the school if he / she has not received invoice at the start of the academic year.

2.3 Fees For 12 (twelve) months are payable monthly in advance by means of debit on order on or before the 2<sup>nd</sup> (second) day of each calendar month or annually in advance by 31 December, depending on the fee payment option exercised by the Account Holder in the Application.

2.4 The School reserves the right to charge interest of 15% (fifteen percent) on all accounts that are in arrears by 30 (thirty) days or longer.

2.5 Payment of monthly fees is not subject to presentation of a statement. Payments are made in accordance with the applicable fee structure.

2.6 In the event where an existing account is / has not been managed in the proper manner, no further applications will be considered and the learner may be turned back from attending classes.

### **3. BREACH OF CONTRACT**

In the event where the undersigned surety, Account Holder or Legal guardian commits a breach of contract of any of the terms of this Agreement, the School may in its sole discretion:

3.1 Refuse the learner entry to the School's premises until the breach has been remedied; or

3.2 Claim damages from the Account Holder and / or the surety and legal guardian; or

3.3 Take whatever legal steps that may be necessary.

### **4. GENERAL**

This agreement constitutes the whole Agreement between the parties relating to the subject matter hereof. No amendment or consensual cancellation of this Agreement or any provision or term thereof or any Agreement, bill of exchange or other document issued or executed pursuant to or in terms of this Agreement shall be binding unless recorded in a written document signed by the parties. Any such extension, waiver or relation or suspension which is so given or made shall be strictly construed as relating strictly to the matter in respect whereof it was made or given.

### **5. JURISDICTION**

This Agreement is subject to South African Law.

### **6. CREDIT INFORMATION**

The Account Holder, surety or legal guardian hereby consents to the disclosure and exchange of personal financial institution in accordance with the National Credit Act.

### **7. DOMICILIUM**

The parties choose as their domicilia citandi et executandi the addresses set out in the Application.

### **8. LEGAL FEES**

In the event where the School takes legal action against the Account Holder, He / she will be liable for all legal fees on an attorney client scale, collection costs and commission, interest and tracing fees.

### **9. CANCELLATION**

9.1 The Account Holder undertakes to give 30 (thirty) calendar days written notice of termination of the enrolment of a learner, failing which the liability be incurred for the full amount of the following term's fees.

9.2 The School shall be entitled to terminate the enrolment of any learner under the following circumstances:



Summary, and with immediate effect, if the learner is guilty of an offence which, in the sole opinion of the school, renders his / her continued enrolment at the school impossible, in which event the Account Holder, after deduction of all amounts otherwise owing to the school, will be refunded a pro – rata proportion of any fees already paid in advance in respect of such learner.

In the event of emigration, which is a long process, the school requires 1 (one) full term's written notice in advance.

SIGNATURE OF ACCOUNT HOLDER

DATE

## SECTION 11: GENERAL INDEMNITY

1. The School and the St Lieutenant Royal House Schools (Pty) Ltd Board of Directors undertake to implement reasonable and generally acceptable measures with regard to the safety and well – being of all learners, educators and visitors to the school.

2. Due to the nature of the matter, the School and the St Lieutenant Royal House Schools (Pty) Ltd Pty Ltd Board of Directors do not accept any responsibility for accidents that may take place in the class, on the school terrain or on the sports field.

3. Each parent is therefore requested to complete this form as proof that you accept the position of the School and the St Lieutenant Royal House Schools (Pty) Ltd Board of Directors as set out above as well as the risks involved therewith.

4 I, \_\_\_\_\_, being the parent / legal guardian of herein, indemnify the school and the St Lieutenant Royal House Schools Pty Ltd Board of Directors for the time being of the St Lieutenant Royal House Schools Pty Ltd (Reg nr /2016/044160/07) for any losses or damages in general, however they may occur, that I as parent / legal guardian of the above learner may suffer as a result of any occurrence whereby the learner may be involved, whether as the causing or suffering negligence or wilful misconduct of the School

Or the SLRHS Board of Directors or any person acting for or controlled by the School or the St Lieutenant Royal House Schools (Pty) Ltd Board of Directors.

5. In particular, I authorise that the aforesaid learner may be involved in all excursions undertaken by/ her group or class during school days as part of his / her learning experience and, where applicable, I agree that he / she may utilise the transport arranged by the School for such excursions. I also indemnify the School and the St Lieutenant Royal House Schools (Pty) Ltd Board of Directors for any damages or losses that I as parent / legal guardian of the above learner may suffer under such circumstances and voluntarily accepts the risks associated therewith, except if such loss or damage arises as a consequence of the gross negligence or wilful misconduct of the School or the St Lieutenant Royal House Schools (Pty) Ltd Board of Directors or any person acting for or controlled by the School or the St Lieutenant Royal House Schools (Pty) Ltd Board of Directors.

6. In the event of the aforesaid learner making use of the bus services to and from the School, I acknowledge that I am aware that such service is operated by an independent contractor and that neither the school nor the St Lieutenant Royal House Schools (Pty) Ltd Board of Directors accepts any responsibility therefore. The St Lieutenant Royal House Schools (Pty) Ltd Board of Directors have, however, in awarding the right to operate the service, laid down certain conditions to ensure that the bus company complies with safety regulations and that the driver is sober and experience with a proven and unblemished record.

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

AS WITNESSES:

1. \_\_\_\_\_

2. \_\_\_\_\_

SIGNATURE OF PARENT / LEGAL GUARDIAN



## SECTION 12: PERMISSION TO USE PHOTOGRAPHS

I understand and acknowledge that, from time to time, informal photographs are taken of the School's learners, and that, in so far as these photographs are placed in the possession or control of the School and / or St Lieutenant Royal House Schools (Pty) Ltd website, newspaper advertisements, magazine advertisements, brochures, flyers, posters, billboards, banners, flippers and signage on buildings and vehicles, which use will be solely for purposes of marketing the School and / or St Lieutenant Royal House Schools (Pty) Ltd. As all marketing material of the School and / or St Lieutenant Royal House Schools (Pty) Ltd portrays excellence, the School and / or St Lieutenant Royal House Schools (Pty) Ltd will at All times, insofar as the use and publication of photographs are placed in the control of the School of the School and / or St Lieutenant Royal House Schools (Pty) Ltd,

\_\_\_\_\_  
SIGNATURE OF PARENT / If GAL GUARDIAN

## SECTION 13: SURVEY - SERVICES / FACILITIES REQUIRED

BUS TRANSPORT TO / FROM SCHOOL REQUIRED FROM ☐ YES ☐ NO WHERE? \_\_\_\_\_

HOLIDAY CARE REQUIRED ☐ YES ☐ NO

## SECTION 14: SURVEY - MARKETING

WHERE DID HEAR YOU ABOUT US? PLEASE INDICATE WITH AN X.

<input type="checkbox"/> BILLBOARD	<input type="checkbox"/> NEWSPAPER	<input type="checkbox"/> MAGAZINE	<input type="checkbox"/> RADIO
<input type="checkbox"/> PRESENTATION	<input type="checkbox"/> BROCHURE	<input type="checkbox"/> FLYER	<input type="checkbox"/> EXHIBITION
<input type="checkbox"/> FRIEND	<input type="checkbox"/> WEB	<input type="checkbox"/> OTHER / SPECIFY _____	

IF NOT. PLEASE PROVIDE FURTHER DETAILS. \_\_\_\_\_

## ST LIEUTENANT ROYAL HOUSE SCHOOLS DEBIT ORDER INSTRUCTION

St Lieutenant Royal House School (Pty) Ltd

50 Pine Road, Cnr. Zinnia Road, Kyalami Main Road, Kyalami Midrand

P O Box 6168 Halfway House, Midrand 168

Reg No 2016/044160/07

CHILD NAME	
FAMILY CODE (ACCOUNT NUMBER)	

### DETAILS- DEBTOR

FULL NAME	
CELL PHONE NUMBER	
E-MAIL ADDRESS	

### DETAILS- BANK

BANK		ACCOUNT NAME	
BRANCH		ACCOUNT NUMBER	
BRANCH NUMBER		ACCOUNT TYPE	CHEQUE / SAVINGS / TRANSMISSION

SCHOOL FEES	
AFTERCARE	
BUS	

NAME LEARNER 1		GR
NAME LEARNER 2		GR
NAME LEARNER 3		GR
NAME LEARNER 4		GR

TOTAL DEBIT AMOUNT	R
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This signed Authority and Mandate refers to the St Lieutenant Royal House Schools (Pty) Ltd contract as dated on signature hereof (the Agreement). I hereby authorise the St Lieutenant Royal House Schools (Pty) Ltd Accounts and Admin Department to issue and deliver payment instructions to the bank for collection against my account at the above mentioned bank (or any other bank to which I may transfer my account) on condition that the sum of such payment instructions will never exceed my obligations as agreed to in the Agreement, commencing date and continuing until this Authority and Mandate is terminated by me by giving the St Lieutenant Royal House Schools (Pty) Ltd Accounts and Admin Department written notice of no less than 1 (one) calendar month, delivered by hand to your school's financial bursar.

This authorised payment instruction must be issued and delivered as follows:

Please submit this form as follows:

- . New learners: Submitted with Application for Admission Form as per enrolment procedure.
- . New Schools: Submitted with Application for Admission Form as per enrolment procedure.
- . Existing Schools: Delivered by hand to the school's financial bursar or, for your convenience, contact the school's financial bursar for an e-mail address or fax number.

Debit my account with the debit amount on the 2<sup>nd</sup> (second) day (Payment Day) of each and every month commencing on the 2<sup>nd</sup> (second) day of the month following the contract date. In the event ordinary business day. Further, if there are insufficient funds in the nominated account to meet the obligation, St Lieutenant Royal House Schools (Pty) Ltd is entitled to track my account and re-present the instruction for payment as soon as sufficient funds are available in my account.

I understand that the withdrawals hereby authorised will be processed through a computerised system provided by South African banks and also understand that the details of each withdrawal will be printed on my bank statement. Each transaction will contain a number, which must be included in the said payment instruction. I shall not be entitled to any refund of amounts which St Lieutenant Royal House Schools (Pty) Ltd has withdrawn while this Authority was in force, if such amounts were legally owing St Lieutenant Royal House Schools (Pty) Ltd.

#### **MANDATE**

I acknowledge that all payment instructions issued by St Lieutenant Royal House Schools (Pty) Ltd shall be treated by my above - mentioned bank as if the instructions had been issued by me personally.

#### **CANCELLATION**

I agree that, although this Authority and Mandate may be cancelled by me, the cancellation will not cancel the Agreement.

#### **ASSIGNMENT**

I acknowledge that the party hereby authorised to affect the drawings/s against my account may not cede or assign any of its rights to any third party without my prior written consent. I may not delegate any of my obligations in terms of this Authority to any third party without prior written consent of the authorised party.

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

SIGNATURE

ASSISTED BY (WHERE LEGALLY NECESSARY)

CAPACITY