

216 Belgravia Road, Belthorn Estate Cape Town, 7780

ADMISSION FORM 2024 Dear parent/ guardian Gender Male Female 1. Child's surname 2. First name/s _____ Age _____ Years ____ Months 3. Date of birth ______ 4. Residential address of child 5. School/ crèche at present _____ 6. Siblings at Kiddie's Hive Educare: (immediate brothers and sisters only) 7. Parents' / guardians information Mother / guardian Father / guardian Name Telephone number (home) Email Cell number Employer's name / work Employer's address Signature Date ____ Signed

DOCUMENTS ATTACHED

1)	Child's birth certificate	L
2)	Child's clinic card	
3)	Parents' ID	
4)	Recent income statement	
5)	Proof of residence	Г