



SPRINGFIELDS COACHING CENTRE

59 & 61 Independence Avenue (Near Civic Centre)
P.O. Box 33953, Lusaka - 10101, Zambia
Tel +260 211 251851 / 254976 Fax +260 211 255140
Cell: +260 977 404814
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Photo

ENROLMENT FORM

PARTICULARS OF STUDENT

Forename _____

Surname _____

Date of Birth (dd/mm/yy) _____

Sex Male Female

Nationality: _____

Grade Applied For: _____

PREVIOUS SCHOOL DETAILS:

A. Name _____

B. Grade _____

C. Country _____

Please attach copy of latest school report of the pupil & a latest passport size photograph.

Medical conditions _____

Learning disabilities _____

PARTICULARS OF PARENTS

PARTICULARS	FATHER	MOTHER
Forename		
Surname		
Occupation / Employer		
Mobile No.		
Tel Number (Office)		
Tel Number (Home)		
Residential Address		
E-Mail Address		
Parents' Status:	Citizen <input type="checkbox"/> Employment Permit <input type="checkbox"/> Resident Permit <input type="checkbox"/> Entry Permit <input type="checkbox"/> Diplomatic <input type="checkbox"/>	
Emergency Contact persons details other than parent's/ guardians	Name	Phone Number
	1.	
	2.	

FEE POLICY

PAYABLE (Please Tick ✓)

TERMLY

TWO INSTALLMENTS

Last day of payment is the 4th day following commencement of the current Term / Month. Payments made after the due date shall be subject to late payment fee of K 5.00 per day. However in the event that fee remains unsettled after 10 days of the commencement of the term, the service will be withdrawn.

For the installment facility, the second installment should be paid within 30 days from the 4th day of the commencement of the term.

Fees are paid on termly basis.

Students for out-going (External Examinations) classes shall clear all payments in one installment at the start of the term.

Return of borrowed books by out-going (External Examinations) students shall be exactly two (2) days after writing the final Exam Paper. A penalty fee of K 5.00 per book per day will be charged afterwards.

A refundable security deposit of K 1, 500.00 would have to be paid at the time of admission that would be adjusted against any books lost by the student or any other damages done to the school property.

STAYING WITHIN THE PREMISES DURING BREAK TIME

Pupils are expected to stay within the premises during break time unless arrangements have been made with the office. Pupils shall not be allowed to go out due to reasons of their own safety (traffic etc). I further accept that Springfields Coaching Centre shall NOT be held liable in any way for his /her safety during his /her stay at the premises.

DECLARATION BY PARENTS / GUARDIAN

If my child is enrolled as a pupil I agree:

- A. To accept full responsibility without reservations, for the payment of the prescribed fees / dues.
- B. To ensure that shall observe and be subject to the rules, dress code and discipline of the Centre. I have received a copy of rules and dress code.
- C. That should any information / details be found to be false or incorrect, the pupil will immediately forfeit his /her place at the Centre.
- D. Pursuant of my child,, being accepted for admission for studies at Springfields Coaching Centre, I hereby agree that the head/ representative of the Centre will limit its attention to my child to First Aid only whilst within the Centre premises, in case of inherent risks or injuries arising from outdoor or indoor activities. I understand that the Centre will immediately endeavour to inform me or our doctor as per details below in case of emergency. In the event of my or the doctor's unavailability, I hereby give permission to the head/representative of the Centre for my child to be treated at the nearest clinic.
- E. Upon my child's wish to discontinue his / her studies at the Centre, I agree to give prior written notice to the Head of School of thirty (30) days before the end of the running term and clear all his / her dues to qualify for security deposit refund. In the absence of the said notice, security deposit shall not be refunded.
- F. I understand that in an event of my child's fee being unsettled within a maximum of 15 days of the commencement of the term, the Centre will have the right to exclude him/ her from all the classes and withhold his/her statement of Entry, Results etc. until such a time that the fee is settled.

I, thus, supply the following information for use in any emergency

Name of doctor..... Tel#:

Mobile#:

Signature of parent/ guardian Date:/...../.....

Comments by Springfields Coaching Centre _____

Signature _____ Date _____ / _____ / _____