



Durban Girls' High School

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ACADEMIC DEVELOPMENT PROGRAMME REGISTRATION FORM 2016

1. LEARNER'S SURNAME: _____ GRADE: _____
2. LEARNER'S FIRST NAME: _____
3. MOTHER'S FULL NAME: _____
4. MOTHER'S CONTACT NUMBERS: WORK: _____
HOME: _____
CELL: _____
5. FATHER'S FULL NAME: _____
6. FATHER'S CONTACT NUMBERS: WORK: _____
HOME: _____
CELL: _____
7. ALTERNATIVE CONTACT PERSON SHOULD NEITHER PARENT BE AVAILABLE:
NAME: _____
RELATIONSHIP: _____
CONTACT NUMBERS: WORK: _____
HOME: _____
CELL: _____
8. PERSON RESPONSIBLE FOR THE FEE:
NAME: _____
RELATIONSHIP: _____
CONTACT NUMBERS: WORK: _____
HOME: _____
CELL: _____
**E-MAIL: _____

METHOD OF PAYMENT: _____

I, _____, ID No. _____

undertake to pay the fees for the ACADEMIC DEVELOPMENT PROGRAMME as used by my daughter (Full name of daughter) _____

SIGNATURE: _____ DATE: _____

WITNESS: _____ DATE: _____

IMPORTANT INFORMATION

- A deposit of R150.00 is needed to secure a place for your daughter.
- R25 per afternoon to a maximum of R300 per month.
- Accounts are sent out monthly and are payable **immediately**.
- Banking details: First National Bank, Davenport Branch, Branch Code 220226, Account No. 50710138401. Please use the **Reference ADP+ NAME** so that your payment is allocated to your ADP account, not your Fees account.

130 years



1882 - 2012

