



THE AFTERCARE OFFICE / DIE NASORGKANTOOR

Van der Merwe Str, Private Bag / Privaatsak X13, Somerset Wes/t 7129 ☎ (021) 8510396 📠 (021) 851 0396

Aftercare Manageress – K. HARTUNG - Nasorgbestuurderes ✉ keri@beaumont4u.co.za

AGREEMENT BETWEEN BEAUMONT AFTERCARE FACILITIES

AND

Father / Guardian:

ID Number:

Physical Address:

Telephone Numbers: Home: Work: Cell:

Mother/Guardian:

ID Number:

Physical Address:

Telephone Numbers: Home: Work: Cell:

1. I/We confirm that the particulars furnished by me/us above, are true and correct and undertake to inform Beaumont Aftercare of any changes within 14 days of such change.
2. I/We confirm that I/we have acquainted myself/ourselves, and in future will keep myself/ourselves acquainted, with the rules of Beaumont Aftercare. I/we undertake to abide by all the rules, including any amendments thereto or any substitutions thereof.
3. I/we confirm that fees payable were explained to me/us in detail. I/We understand that the aftercare fees are for school terms only and that holiday fees will be charged for additionally. I/We understand further that fees will be payable for the months of July and December. I/we also understand that a term's notice must be given if I/we decide not to make use of the services of Beaumont Aftercare any longer. I/we understand that I/we will be held liable for fees for a full term if I/we fail to give appropriate notice and accept responsibility for the payment thereof.
4. Both parents/guardians, where applicable, accept responsibility, jointly and severally, for the punctual payment of all fees referred to above, which may become due and payable to Beaumont Aftercare, which fees will be payable termly in advance. We consent that Beaumont Aftercare shall at all time be at liberty to proceed with collection and excussion proceedings against any one of us, should these fees not be paid.
5. I/We undertake to pay 15.5% interest a year on any amount that has been outstanding for a period of longer than 30 days.
6. A certificate issued by any member of the personnel of Beaumont Aftercare or his duly authorized agent that purports to certify the amount due hereunder, shall be accepted as correct and prima facie proof of such indebtedness and shall have sufficient probative value to enable Beaumont Aftercare to obtain summary judgment or provisional sentence against us in any competent court, for the amount stated in such certificate and we accept the onus of disproving the amount so stated as not being the amount owing.
7. Should any payment as undertaken by me/us, not be made on due date, for any reason whatsoever, Beaumont Aftercare may immediately regard the total balance outstanding, which shall include fees and interest, as due and payable and may issue summons thereof in any competent court, without further notice or demand to me/us.
8. Beaumont Aftercare further reserves the right to suspend their services immediately, should these fees not be paid.
9. I/we also agree that by non-payment, judgment by default can be taken against me/us.
10. If steps have to be taken against me/us to collect outstanding fees, I/we hereby agree that the costs incurred can be claimed against me/us on an attorney-and-client scale, which shall include collection commission calculated at 10% on each and every payment made in reduction of the principle debt, interest and costs. Beaumont Aftercare may allocate any payment to capital, interest and costs or any other item as they deem fit, despite any allocation made or deemed to be made by us.

11. I/we agree to the jurisdiction of the Magistrate's Court in terms of section 45 of the Magistrate's Court Act. 32 of 1944, for the recovery of any amount due in terms hereof.
12. For the purpose of serving any legal process pieces that can be issued against me/us, I/we choose the residential address above as our domisilium citandi et executandi.
13. Indemnity clause
- 13.1 I/we _____ (full names) being the parent of _____ (child's name) do hereby consent to my/our child taking part in any activities of Beaumont Aftercare, including outings and sporting activities, while attending Beaumont Aftercare.
- 13.2 I/we authorize Beaumont Aftercare in the event of my/our child/ren requiring urgent medical treatment to get appropriate medical assistance. I/we accept responsibility for the payment of the costs thus incurred.
- 13.3 I/We undertake to immediately get the necessary medical advice or treatment if I/we have reason to believe that My/our child/ren have any contagious or infectious disease capable of creating a risk for other persons, through their participation in any aspect of Beaumont Aftercare's activities, including, without restriction, attendance of any instructional occasion or participation in Beaumont Aftercare's project, sport or recreation; and that, if in terms of such medical advice it is desirable, my/our child/ren shall withdraw from any such activity; and that I/we indemnify Beaumont Aftercare against any liability of whatever nature that may directly or indirectly arise for Beaumont Aftercare in consequence of my/our child/ren's failure to comply with this undertaking.

Signed at _____ on this _____ day of _____ 20_____

Parent/Guardian (Sir)

Parent/Guardian (Madam)

As witness: