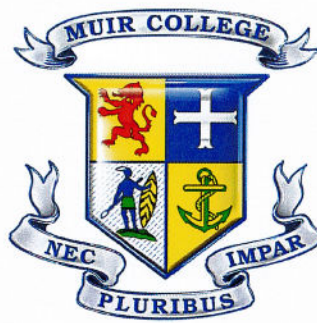


D. D. Francis

Headmaster

Tel : +27 41 966 1147
Fax: +27 41 961 0187
headmaster@muircollege.co.za
secretary@muircollege.co.za



Muir College Boys' High School,
P.O. Box 231, 15 Sir Thomas Muir Drive,
Vanes Estate, KARIEGA 6230
www.muircollege.co.za

Dear Parents

Re: ADMISSION TO MUIR COLLEGE – 2027

Please complete the Muir College Application form for next year and return to us by **Friday, 29 May 2026**.

NB: Please **APPLY** at **OTHER SCHOOLS** as well, as submission of this application **DOES NOT** guarantee admission to Muir College.

Please note that the following documents **must** accompany your application form:-

- **PUPIL'S REPORT:** a copy of his December 2025 & March 2026 report.
- **PUPIL'S UNABRIDGED BIRTH CERTIFICATE:** must have the mother, father and child's information on. If this is not available we need proof that you have applied for one. We will then need a copy of his normal Birth Certificate.
- **PUPIL'S I.D. POTO:** most recent photo.
- **COPY OF MOTHER AND FATHER'S I.D.:** If either parent is deceased a copy of the death certificate is required. If either of the parents are not involved at all then an affidavit is required stating such.
- **COPY OF PAYEE'S I.D. AND PROOF OF INCOME AND ADDRESS:** if someone other than the parents are responsible for the school fees.
- **PROOF OF INCOME:** for both parents. If unemployed an affidavit indicating your last date of employment. If self-employed a copy of the last audited Income Statement or a letter from SARS indicating your income.
- **PROOF OF ADDRESS**
- **PROOF OF GUARDIANSHIP:** if you are the Legal Guardian.

Please make sure that the form is filled in correctly and that the back of the application is signed by both parents.

If parents are not paying the school fees the payee must sign the back of the form under **Declaration – Non Parent**.

The **Verification form** must please be handed in at the learner's present school to be filled in by the principal.

A separate **Hostel form** must be filled in if you are applying for your son to be in the hostel.

Thank you

N.L. EMMERSON
SECRETARY

February 2026

D. D. Francis
Acting Headmaster

Tel : +27 41 966 1147
Fax: +27 41 961 0187
dfrancis@muircollege.co.za
secretary@muircollege.co.za



Muir College Boys' High School,
P.O. Box 231, 15 Sir Thomas Muir Drive,
Vanes Estate, KARIEGA 6230
www.muircollege.co.za

VERIFICATION OF INFORMATION AND REFERENCE

This form must be completed by the Principal of the school which the learner is currently attending and must be submitted together with the application form and other documentation required for admissions.

The original of this documentation must be submitted WITHOUT CORRECTIONS OR ERASURES.

I, _____ (Principals name),

Principal of _____ (Schools full name)

hereby confirm that _____ (Learner's full name)

Is currently enrolled in Grade _____, at the above mentioned school.

Date on which the learner was enrolled at the above mentioned school. _____

His record may be described as follows: (Please put a cross in the appropriate block)

ACADEMIC PROGRESS TO DATE

VERY GOOD	GOOD	ADEQUATE/SATISFACTORY	REQUIRING SUPPORT
-----------	------	-----------------------	-------------------

BEHAVIOUR/ DISCIPLINE

VERY WELL BEHAVED	GOOD	ADEQUATE/SATISFACTORY	REQUIRES ATTENTION
-------------------	------	-----------------------	--------------------

WORK ETHIC / APPLICATION TO TASKS

WELL MOTIVATED. REGULARLY DOES MORE THAN IS REQUIRED	GOOD. DOES ALL THAT IS REQUIRED AND MORE AT TIMES.	DOES ONLY WHAT IS REQUIRED / REQUIRES MOTIVATION AT TIMES	REQUIRING CONSTANT MOTIVATION AND SUPPORT.
--	--	---	--

PARENTAL INVOLVEMENT AND SUPPORT / HOMEWORK

PARENTS ARE ACTIVELY INVOLVED AND VERY SUPPORTIVE	GOOD, REGULAR SUPPORT.	FAIR TO ADEQUATE SUPPORT AND INVOLVEMENT	LITTLE EVIDENCE OF INVOLVEMENT AND SUPPORT
---	------------------------	--	--

FINANCIAL COMMITMENT

VERY GOOD, FEES ARE ALWAYS PAID ON TIME	GOOD. FEES ARE USUALLY PAID ON TIME	FAIR. PARENTS TEND TO SKIP A FEW PAYMENTS AND THEN MAKEUP.	POOR. THE LEARNER CURRENTLY OWES R _____
---	-------------------------------------	--	--

SPORT

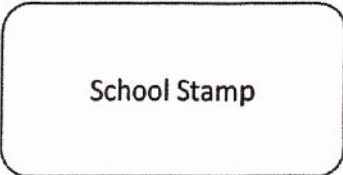
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CULTURAL ACTIVITIES

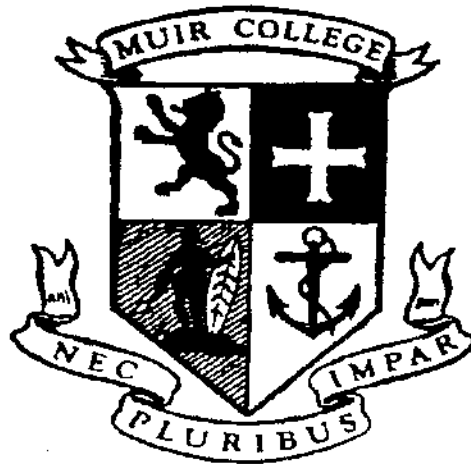
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PRINCIPAL

DATE



MUIR COLLEGE BOYS' HIGH SCHOOL, UITENHAGE



APPLICATION FOR ADMISSION OF

.....
(Learner's Full Names)

FOR THE YEAR
2027

FOR OFFICIAL USE ONLY			
PUPIL'S ACADEMIC REPORTS (December 2025 & March 2026 reports)		VERIFICATION OF INFORMATION (Form)	
PUPIL'S UNABRIDGED BIRTH CERTIFICATE		PROOF OF INCOME (Both parents)	
PHOTOGRAPH OF PUPIL (Passport size, head & shoulders)		PROOF OF INCOME (Person other than parents)	
I.D. OF FATHER (If deceased, a death certificate is required)		I.D. OF PERSON RESPONSIBLE FOR THE PAYMENT OF FEES	
I.D. OF MOTHER (If deceased, a death certificate is required)			
PROOF OF RESIDENTIAL ADDRESS		DEPOSIT RECEIVED (Only if/when application is approved)	
ADMIN NO: GRADE: HOSTEL:			



1	LEARNER'S INFORMATION							
(a)	First Name/s							
	Surname							
	I.D. Number							
	Date of Birth							
	To be admitted to Grade:							
	Age	Years		Months				
	Nationality							
	Population Group / Ethnicity							
	Home Language		Second Language					
	Number of Children in Family							
	Number of Children at Muir		Grade/s					
	Learner's Residential Address							
			City/District:		Postal Code:			
			Mother		Father		Both Parents	
Learner resides with his –								
Emergency Telephone No.		<i>(See also Section 2 below.)</i>						
Learner's Cell Phone Number								
(b)	If the Learner is not a South African citizen, please provide the following information:							
Immigrant Pupil / Passport No.								
Study Permit Number		Expiry Date:						
Permanent Residence Permit No.		Expiry Date:						
Temporary Residence Permit No.		Expiry Date:						
2	EMERGENCY CONTACT PERSON <i>(other than parents)</i>							
First Name/s								
Surname						Title:		
Residential Address of Emergency Contact Person								
		City/District:		Postal Code:				
		Home:		Work:				
Telephone Numbers		Cell:						
		Relationship to Learner						

3	PARTICULARS OF BIOLOGICAL FATHER	
(a)	First Name/s	
	Surname	Title:
	Father's Residential Address	
		City/District: Postal Code:
	Occupation	
	Employer / Company Name	
	If employed by the Dept of Education , name the school or district office:	
	Employee or Persal Number	
	Income Tax Number.	
	Physical Work Address	
		City/District: Postal Code:
	Telephone Numbers	Home: Work:
		Cell:
	I.D. Number	
	Marital Status	<i>(If remarried, fill in page 5, section 3(e))</i>
	E-mail Address	
	Is the Father an Old Muirite?	

3	PARTICULARS OF BIOLOGICAL MOTHER	
(b)	First Name/s	
	Surname	Title:
	Mother's Residential Address	
		City/District: Postal Code:
	Occupation	
	Employer / Company Name	
	If employed by the Dept of Education , name the school or district office:	
	Employee or/ Persal Number	
	Income Tax Number	
	Physical Work Address	
		City/District: Postal Code:
	Telephone Numbers	Home: Work:
		Cell:
	I.D. Number	
	Marital Status	<i>(If remarried, fill in page 5, section 3(f))</i>
	E-mail Address	

3	PARTICULARS OF LEGAL GUARDIAN (if not one of the Learner's parents)	
(c)	Full Names	
	Surname	
	Guardian's Residential Address	
		City/District: Postal Code:
	Occupation	
	Employer / Company Name	
	If employed by the Dept of Education , name the school or district office:	
	Employee or Persal Number	
	Income Tax Number	
	Physical Work Address	
		City/District: Postal Code:
	Telephone Numbers	Home: Work:
		Cell:
	I.D. Number	
	Marital Status	
	E-mail Address	

3	LEGAL GUARDIAN: Personal Details & Income	
(d)	If Self-Employed –	
	Business Address	Street
		Suburb
		City / District P/Code:
	Postal Address	P O Box Number
		Suburb / Post Office
		City / District P/Code:
	Work Telephone No.	
	Gross Yearly Turnover	
	Type of Business	
	Inception Date	From: / /
	Ownership Status	Sole Owner Partnership CC Company
	If Pensioner, indicate the source of Pension	State Private
	Name of Pension Fund	
	Pension Number	
	Gross Yearly Pension	
	If Unemployed –	
	UIF / Unemployment Number	

3 PARTICULARS OF STEPMOTHER	
(e) First Name/s	
Surname	
Stepmother's Residential Address	
	City/District: Postal Code:
Occupation	
Employer / Company Name	
If employed by the Dept of Education , name the school or district office:	
Employee or Persal Number	
Income Tax Nunmber	
Physical Work Address	
	City/District: Postal Code:
Telephone Numbers	Home: Work:
	Cell:
I.D. Number	
Marital Status	
E-mail Address	

3 PARTICULARS OF STEPFATHER	
(f) Full Names	
Surname	
Stepfather's Residential Address	
	City/District: Postal Code:
Occupation	
Employer / Company Name	
If employed by the Dept of Education , name the school or district office:	
Employee or Persal Number	
Income Tax No.	
Physical Work Address	
	City/District: Postal Code:
Telephone Numbers	Home: Work:
	Cell:
I.D. Number	
Marital Status	
E-mail Address	

3	Who is responsible for the payment of school fees? (Is it the father, mother, or another person?)	
(g)	If you are the Legal Guardian of the Learner, please indicate your relationship to him: e.g. Grandparent, Foster Parent, etc	
(h)	Is the Learner an adopted child? (Yes/No)	

4	BOARDING	
(a)	Do you wish the Learner to be admitted as a Boarder?	
(b)	From which date?	
(c)	Will he be attending boarding school for the first time?	

5	ACADEMIC INFORMATION	
(a)	Has your son ever required any remedial education?	
	If so, please specify:	
(b)	Has your son failed a Grade or been kept back?	
	If yes, please specify which grade/s:	

6	CURRENT / MOST RECENT SCHOOL	
(a)	Full name of the school most recently attended by the Learner	
	School Address	
	City/District:	Postal Code:
	School Telephone Number	
	School E-Mail Address	
(b)	Last grade passed	

7	RELIGION / RELIGIOUS DENOMINATION	
----------	--	--

8	MEDICAL AND PSYCHOLOGICAL HISTORY				
(a)	Medical Aid Scheme				
	Medical Aid Number				
	Name of Main Member				
(b)	Does the Learner have, or has he had, any medical, psychological or other condition that has affected or may affect his academic progress, behaviour or adjustment? If so, please provide details.				
(c)	In case of illness, please indicate your preferred doctor & dentist in Uitenhage.	Doctor		Tel No.	
		Dentist		Tel No.	

(d)	<u>Underline illness(es)</u> the Learner has had	Measles, Whooping Cough, Chicken Pox, Mumps		
(e)	Other illnesses - eg Asthma, Epilepsy, etc.			
(f)	Surgical operation/s the Learner has had. (Give date and nature of operation/s.)			
(g)	Please <u>underline</u> the illness/es against which the Learner has been immunized	Tuberculosis (B.C.G.), Diphtheria, Poliomyelitis, Whooping Cough, Measles, German Measles, Tetanus, Covid19		
(h)	Dexterity of Learner	Right-Handed		Left-Handed
		Ambidextrous		
(i)	Social Grant	Yes		No

9	EXTRAMURAL HISTORY AND ACHIEVEMENTS			
(a)	Sport:			
a.1	Does the Learner participate actively in a school sports programme?			
a.2	If the answer to a.1 is "NO", please specify the reason.			
a.3	Please specify the sport/s in which he takes part, and the level at which he participates – eg. U11B Cricket; 2 nd Team Hockey; EP Schools Rugby; etc			
(b)	Cultural and other activities: Please specify societies, clubs or groups (in OR out of school) of which the Learner is a member, or in which he has shown an active interest.			
(c)	Leadership: If the Learner has been selected at some stage to play a leadership role at school or in a sport, society or club, please give details. (e.g. Prefect, Captain, Chairman, etc.)			
(d)	Awards: Please supply details of Prizes, Medals and Awards received by the Learner <u>in and out</u> of school.			
(e)	Additional Talents (excluding Academic and Sporting ability): Please provide details of any special talents which have revealed themselves STRONGLY – e.g. Art, Music, etc.			

10	ADDITIONAL RELEVANT INFORMATION

UNDERTAKING BY PARENT/S OR GUARDIAN/S

1. I / We hereby apply for to admission of

..... (full name of Learner),
hereinafter 'the Learner', to MUIR COLLEGE BOYS' HIGH SCHOOL, hereinafter 'the
School', and confirm that the Learner complies with the School's official criteria for admission.

2. I / We hereby certify that I / we have legal custody and/or guardianship in respect of the above-named Learner.

3. Rules & Disciplinary Code

a. I / We undertake to adhere to the rules and the provisions of the Disciplinary Code of Conduct of the School (and any amendments thereto) that may be relevant to me/us in my/our capacity as the parent/s or guardian/s of the Learner.

b. I / We agree and accept that the Learner shall at all times be subject to the rules and the Disciplinary Code of Conduct of the School (and any amendments thereto), and I/we undertake to support the School in the enforcement of such rules and the code.

4. I / We hereby authorise the Principal, or any person duly authorised by him/her, to act *in loco parentis* in respect of any matter pertaining to the Learner while he is entrusted to the care of the school, from the start to the end of the school day and while the Learner is engaged in duly authorised extramural activities at or under the auspices of the school.

5. I / We understand that, while every reasonable effort will be made to prevent losses of or damage to a learner's clothing and personal possessions, the School cannot be held liable for any such losses or damage.

6. I / We undertake to reimburse the School for any loss or damage to School property that may be caused by the Learner.

7. School & Hostel Fees

I / We jointly and severally undertake to pay all school fees in accordance with the following:

a. The **compulsory annual tuition fees** for the forthcoming year are announced in November each year, following adoption of a resolution by the majority of parents present at a general meeting of parents convened for this purpose.
(Note: The compulsory tuition fee for the 2026 academic year is R24 350 per annum.)

b. The **compulsory annual hostel fees** for the forthcoming academic year are announced in November each year, following adoption of a resolution by the majority of parents present at an annual meeting held for this purpose.
(Note: The compulsory hostel fee for the 2026 academic year is R50 700 per annum.)

c. School fees are payable in advance, and are due on the first day of the school year.

d. Payment options are as follows:

i. Fees **paid in full by 28 February** are subject to a 5% discount.

ii. Fees may be paid **quarterly in advance** at the **beginning** of each quarter.

iii. Fees may be paid in ten (10) equal **monthly instalments**, the first instalment being due on the first day of the academic year (in January), with each of the remaining instalments being due on the first day of each of the following nine (9) months – ie from February to October.

- c. For 2027, a deposit of **R4 500** in respect of tuition fees for day scholars, and a further deposit of **R4 500** in respect of hostel fees for boarders are required when a Learner is first offered admission to the School. If all monthly instalments have been paid by the due date each month, deposits will be credited to the Learner's fee account in the **last term**.
- In addition, a **book deposit** is required before a learner is admitted to the School. (Details regarding book deposits are available from the School Secretary or the Finance Manager.)
- f. In accordance with family law, **parents are jointly and severally liable** for the payment of the school fees of their children, irrespective of the marital status of the parents.
- g. In accordance with the South African Schools Act, the parents/guardian/s of a learner are liable to pay compulsory school fees.
- h. In terms of Sections 40 and 41 of the South African Schools Act, the school may, through process of law, enforce the payment of compulsory school fees.
- i. In the event of the non-payment of school fees, the School will be obliged to commence formal proceedings that may lead to legal action against either or both parents, or the legal guardian of the Learner.
- j. The signatories to this admission application undertake to pay all legal costs, including all attorney/client fees and collection costs that may be incurred by the School in the event of the School having to take legal action for the recovery of school fees.
- k. [Rescinded.]
- l. Parents who are unable to pay school fees may apply for partial or temporary relief, or exemption from fees.
- m. The School may hold and process by computer or other means any information obtained by the School regarding the parents/guardians in relation to their liability for the payment school fees.
- n. The School may conduct a credit enquiry and/or credit information search regarding the parents/guardians either through a credit information bureau, or persons acting as their agents and/or credit grantors.
- o. The School may transmit details regarding the parents' or guardians' performances in meeting their obligations in terms of the payment of school fees, and may share such information with registered credit grantors for the purpose of credit risk management and related decisions.
- p. If parents or guardians fail to meet their school fee obligations, the School may report the parents' or guardians' non-performance to a registered credit information bureau. Any information conveyed to a credit information bureau will thereby become available to other credit grantors and may be used by them in making credit risk management decisions.
- q. Should there be a query or a dispute regarding any statement of account pertaining to any school fees, the Bursar must be notified of the details in writing as soon as possible.
- r. The School's financial records and agreements are available only in English.
8. I / We undertake to give **one term's** notice in writing of any intention to remove the Learner from the School, and furthermore agree to return any books and/or equipment belonging to the School which the Learner may have in his possession. I/We accept that this undertaking will endure until the Learner has left the School and all outstanding fees have been paid in full.
9. I / We agree that the Learner may participate in edumetric and psychometric tests and/or assessments that have been approved by the Director of Education.
10. I / We agree that if our child is over the compulsory school-going age (15 years) he/she will attend school regularly and **will only be permitted to be absent for bona fide medical reasons**.

11. I / We understand and accept that the School reserves the right to verify all information supplied to it in this application. We accept that, in the event of the submission of false information or fraudulent documentation, the School reserves the right to lay criminal charges against any of the parties to this application.
12. I / We accept responsibility for the immunization of the Learner against contagious diseases and normal infections, and shall produce proof thereof if required to do so.
13. I / We accept the responsibility for the Learner's transport to and from the School.
14. I / We undertake to inform the Principal of the Learner's absence from school at the earliest opportunity, and declare that we are willing to produce a doctor's certificate if and when required.
15. I / We undertake to accept and support the School's constitution, policies (including those pertaining to admission), Code of Conduct, rules, regulations and procedures as approved by the Governing Body of the School, or by the Headmaster, or by the relevant national or provincial education authorities, as appropriate, whether or not such policies, rules, regulations and procedures have been formally published.
(Note: A copy of the Code of Conduct is displayed at the School, and the policies, rules, and regulations are available for inspection on request.)
16. On behalf of the Learner and of myself/ourselves, I / we accept the Code of Conduct and the Rules of the hostel, and undertake to respect any disciplinary action that may be taken by the School arising from offences within the framework of the said Code and Rules.
17. I / We specifically understand and accept that the following acts by a learner while he is in School uniform or on School premises or while engaged in any formal activity associated with the School are infringements of the fundamental rules of the School, and will not be tolerated or condoned under any circumstances:
 - a. the possession or smoking of tobacco or related substances;
 - b. the possession or use of any vaping materials;
 - c. the possession or use of any narcotic drug; and
 - d. the possession or consumption of alcohol.
18. The signatory/ies hereto hereby choose/s as his/her/their *domicilium citandi et executandi* the address indicated below. In the event of a change of domicile, parents are required to notify the school of such change in writing.
19. This undertaking will be valid in its entirety from the day on which it is signed by the parent/s or guardian/s until the Learner has officially left the School and all outstanding fees have been paid in full.
20. I / We acknowledge and accept that completion of this form will not automatically result in confirmation of our son's acceptance at Muir College. (Note: Notification of acceptance or rejection will be conveyed to the applicant/s via a letter from the Headmaster.)
21. I / We hereby declare that I / we am/are the legal guardian/s of the child and that I / we am/are entitled to sign this document, and shall be bound hereto both as parent/s or guardian, and in my / our personal capacity.

ADDRESS: The signatory/signatories hereto hereby chooses/choose as his/her/their *domicillium citandi et executandi* the following physical address:

.....

.....

.....

DECLARATION : PARENT/S OR GUARDIAN

I / We,

and
hereby declare that the information that I / we have provided in this form is true and correct, and by signature below, I / we give the Chairman of the School Governing Body or his designate permission to check and to confirm any of the details listed by me/us. I / We understand that, should any of the information supplied by me/us is found to be false, action may be taken against me/us in accordance with paragraph 11 above.

Signed on this day of 20.....

.....
FATHER'S SIGNATURE

.....
WITNESS

.....
MOTHER'S SIGNATURE

.....
WITNESS

.....
GUARDIAN'S SIGNATURE

.....
WITNESS

DECLARATION : NON-PARENT RESPONSIBLE FOR FEES

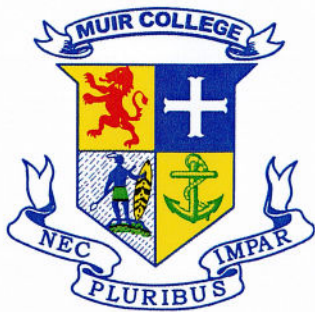
I,,
the undersigned, undertake legally to bind myself to paying the Learner's school fees during his education at Muir College Boys' High School and any affiliated Primary section as a guardian other than the parent/s listed on this form.

Signed on this day of 20.....

.....
SIGNATURE

.....
WITNESS

<p>APPLICATIONS WILL BE CONSIDERED ONLY IF ACCOMPANIED BY THE FOLLOWING:</p> <ul style="list-style-type: none"> • proof of residence in the School's feeder area (c.g. a Lights and/or Water account) • the Learner's December 2025 & March 2026 school report • proof of guardianship if you are a legal guardian other than the biological parents of the Learner • one (2 for boarders) recent passport-size photograph of the Learner, to be attached to this form • a CERTIFIED copy of the Learner's UNABRIDGED birth certificate • copies of both parents' / guardians' ID documents • if either parent is not involved at all in the care of the child, an affidavit stating such fact, with reasons • proof of income, as follows: <ul style="list-style-type: none"> a) if employed, certified copies of recent salary slip of BOTH parents b) if unemployed, a letter from the Department of Labour indicating your last date of employment c) if self-employed, a copy of your last audited Income Statement or a letter from SARS indicating your income. <p>NB - If this application is successful, an official transfer card from the previous school will be required before admission.</p>
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**MUIR COLLEGE
APPLICATION FOR ADMISSION
OF PUPIL TO HOSTEL
(SIR THOMAS MUIR HOUSE)**

Admission No.

The completed form shall be kept for as long as the pupil remains in the hostel and therefore for as long as boarding fees are owing by the parent / guardian.

In cases where debts are transferred to the Attorneys for collection, this form and other application correspondence must accompany the application for transfer.

PUPILS DETAILS

1. Name of pupil in full:
2. Date of birth:
3. Name of present school:
4. Present Grade:
5. Date on which admission is desired:
6. Particulars regarding parent / guardian:

FATHERS DETAILS

- 6.1 Full name:
- 6.2 Residential address:
- 6.3 Postal address:

6.4 Occupation:
6.5 Identity number:
6.6 Contact Details Home:
Work:
Cell. No.:
6.7 Marital status:
6.8 Name of employer:
Address of employer:
.....
.....
.....
.....
Telephone No.:
6.9 Medical Aid:
Medical Aid Number:

MOTHERS DETAILS

6.10 Full name:
6.11 Residential address:
.....
.....
.....
6.12 Postal address:
.....
.....
6.13 Occupation:
6.14 Identity number:
6.15 Contact Details Home:
Work:
Cell. No.:

- 6.16 Marital status:
- 6.17 Name of employer:
- Address of employer:
-
-
-
-
- Telephone No.:
- 6.18 Medical Aid:
- Medical Aid Number:
7. Reason's for leaving the present school:
-
8. Has pupil any health problems or physical handicaps? If so, please specify:
-
9. Previous operation dates:
10. Underline diseases which pupil has had:
Measles; German Measles; Whooping Cough; Chicken Pox; Mumps;
Scarlet Fever; Diphtheria; Rheumatic Fever.
11. Underline diseases against which pupil has been immunized:
Poliomyelitis; Diphtheria, Whooping Cough; Tetanus; Tuberculosis;
(BCG); Measles; Mumps.
12. Name of Doctor to be called during illness:
13. Contact Details: Office:
- Cell. No.:
13. Religious denomination:
14. Declaration and undertaking by parent / guardian:
- 14.1 I the undersigned parent / guardian of the abovementioned child hereby declare that the particulars, As furnished, are to the best of my knowledge correct, and undertake: -
- 14.1.1 In the event of this application being successful and my child not making use of the accommodation, to accept liability for the full boarding fees for one school quarter, unless the committee having general supervision of the hostel decides otherwise: in the event of this application being successful and my child making use of the

accommodation from a date later than that mentioned in paragraph 5 above, to accept liability for the full boarding fees from the date stated in paragraph 5 above, unless the said committee decides otherwise:

- 14.1.2 to give written notice not less than one school quarter in advance of my intention to remove my child, except in cases where the committee has accepted shorter notice and, if I fail to comply herewith, to accept liability for the full boarding fees for the child until the end of the school quarter in respect of which notice should have been given:
- 14.1.3 to pay boarding fees payable, as by the Governing Body from time to time, either monthly or quarterly in advance:
- 14.1.4 to abide by the internal rules of the hostel:
- 14.2 The Superintendent stands in *loco parentis* to all pupils in the hostel and is hereby empowered to act as such as my agent in all emergencies and medical or other matters.

.....
Signature of
Parent / Guardian

.....
Date

PLEASE TAKE NOTE OF THE FOLLOWING:

- 1. In terms of the rules relating to hostels a boarder whose fees for any particular quarter have not been paid in full at the end of that quarter shall be excluded from the hostel from the beginning of the next succeeding quarter and may not be readmitted until the arrear boarding fees have been paid.
- 2. Muir College does not accept liability for any loss of or damage to the personal effects of boarders, irrespective of how such loss or damage is caused.
- 3. Parents are very strongly advised to insure their children's possessions against fire, theft, etc.

APPLICATIONS WILL ONLY BE CONSIDERED IF ACCOMPANIED BY THE FOLLOWING DOCUMENTS

- Copy of birth certificate
- Copy of Medical Aid Card
- I.D. Photograph of pupil
- Deposit of **R4 500** on acceptance to the hostel is payable. (Hostel fees for 2026 are R50 700-00 per annum, 2027 fees are not available at present)

OFFICE USE

Accepted as a boarder at Sir Thomas Muir House (Hostel) on:

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