

Name:
Grade:
Year:
Reference:
Comments:



photo

REQUIREMENTS

TICK

Copy of Immunisation records/Copy of learner's Vaccination Records, if available	
Copy of learner's Birth Certificate / ID document	
TWO ID photographs (child)	
Copy of Identity Document of parent(s)/guardian(s)	
Copy of payslip of parent(s)/guardian(s) - Affidavit required if self-employed	
Copy of learner's latest Progress Report from previous school/ or FINAL progress Report	
Copy of transfer letter from previous school attended	
Proof of residence of parent(s)/guardian(s)	
Proof of bank statement of parent(s)/guardian(s)	

1. Please ensure that all the above documents are submitted with the application for approval. Failure to do so will result in the application being declined.

2. Affordability interview between Administration / Financial Department/Deputy Principal and parent(s)/guardian(s)

Please cross Yes /No

YES	NO
-----	----

3. How did you hear about CityKidz Pre & Primary School?

a	Our website		d	A referral	
b	Flyers		e	The Inner City Gazette	
c	Street signage		f	Other	

4. The prospective parent/guardian has applied for/qualifies for the following option/s:

OPTION 1		OPTION 2	
The Early Bird Offer-Fees paid for entire year by 01 st February		The Two Bird Offer-per sibling	
10% Discount		5% Discount	

CityKidz Pre & Primary School

Registration Form

18 Mooi Street
City & Suburban
2001

PO Box 260003
Excom
2023

Tel: (011) 334-6631
e-mail: info@citykidz.co.za

REGISTRATION 2020



We welcome you to our School

CityKidz Pre & Primary School (Association Incorporated Under Section 21)
Registration number 2007/014450/08

Principal S Reynolds
Deputy Principal C Moyo **Deputy Principal** T Krain
Directors RD Plit W Freeman

CityKidz Pre & Primary School : REGISTRATION FOR ADMISSION 2020

YEAR APPLIED FOR _____

GRADE APPLIED FOR _____

GRADE

RR	R	1	2	3	4	5	6	7
----	---	---	---	---	---	---	---	---

CURRENT GRADE _____ LAST GRADE PASSED _____ YEAR _____ GRADE/S REPEATED _____

→ **MOST IMPORTANT**
This Application for Admission will only be processed if ALL fields are completed legibly, is signed and ALL necessary supporting documents are attached.

NECESSARY SUPPORTING DOCUMENTS, COMPLETED SECTIONS & FORMS

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> Registration Fee R300-00: NEW ENROLMENTS ONLY. Once off – NON-REFUNDABLE- payable for new enrolments only to secure a place at the school. Payable together with the Annual Admin Levy.
<input type="checkbox"/> ANNUAL SCHOOL ADMINISTRATION LEVY – R755.00
<input type="checkbox"/> Copy of learner’s FINAL progress Report once available
<input type="checkbox"/> Copy of learner’s latest Progress Report
<input type="checkbox"/> Copy of learner’s Birth Certificate / ID document
<input type="checkbox"/> Copy of learner’s Vaccination Records, if available
<input type="checkbox"/> Copy of learner’s Residence and Study Permit, if foreign
<input type="checkbox"/> Copy of parents’ / legal guardians’ ID document
<input type="checkbox"/> The transfer card from the previous school-when issued on leaving | Two recent colour photos of learner (ID SIZE) If not already submitted |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|

FOR OFFICE USE

Interview Date _____ Notes _____ _____ _____	Approved _____ Date _____ Commencement Date: _____ Grade: _____	Family Code _____ Credit Reference _____ Siblings at 1. _____ the school 2. _____
-------------------------------------------------------------------	--------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------

SECTION 1A: LEARNER’S PARTICULARS

SURNAME _____	FULL NAMES AS ON BIRTH CERTIFICATE / ID DOCUMENT _____																			
PREFERRED NAME _____	IDENTITY NUMBER <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>																			
DATE OF BIRTH _____	AGE _____	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE																		
HOME & OTHER SPOKEN LANGUAGE/S _____	HOME _____	OTHER _____																		
LANGUAGE/S OF LEARNING & TEACHING FIRST (HL): ENGLISH		SECOND (FAL): AFRIKAANS																		
NUMBER OF CHILDREN IN FAMILY _____	POSITION OF CHILD IN FAMILY _____																			
NATIONALITY _____	COUNTRY OF ORIGIN _____	DATE OF IMMIGRATION _____																		
RACE	<table border="1" style="display: inline-table;"><tr><td>ASIAN</td><td>AFRICAN</td><td>COLOURED</td><td>INDIAN</td><td>WHITE</td><td>OTHER</td></tr></table>		ASIAN	AFRICAN	COLOURED	INDIAN	WHITE	OTHER												
ASIAN	AFRICAN	COLOURED	INDIAN	WHITE	OTHER															
RELIGION _____	RESIDENCE	<table border="1" style="display: inline-table;"><tr><td>PARENTS</td><td>GUARDIANS</td></tr></table>	PARENTS	GUARDIANS																
PARENTS	GUARDIANS																			
TRANSPORT TO/FROM SCHOOL	<table border="1" style="display: inline-table;"><tr><td>MOTOR VEHICLE</td><td>BUS</td><td>TAXI</td><td>WALK</td></tr></table>		MOTOR VEHICLE	BUS	TAXI	WALK														
MOTOR VEHICLE	BUS	TAXI	WALK																	

SECTION 1B: LEARNER'S EDUCATIONAL DETAILS

Current School _____ Previous School _____
 Address _____ Address _____

 Principal _____ Principal _____
 Has admission to any other school/s ever been refused? If yes, please state reason _____

Yes	No
-----	----

SECTION 2: LEARNER'S MEDICAL DETAILS

BLOOD TYPE

O+	O-	A+	A-	AB-	AB+	B+	B-	UNKNOWN
----	----	----	----	-----	-----	----	----	---------

FAMILY DOCTOR: NAME _____ TEL NO _____
 ADDRESS _____ CODE _____
 MEDICAL AID: NAME _____ MEMBER NUMBER _____
 MAIN MEMBER INITIALS & SURNAME _____ MAIN MEMBER ID NUMBER _____
 OPTION _____

1. Has the learner received all the necessary immunisations? If no, please state reason _____

YES	NO
-----	----

2. Has the learner suffered from any of the following illnesses? Please indicate with an x

<input type="checkbox"/> ASTHMA	<input type="checkbox"/> ENTERIC FEVER	<input type="checkbox"/> MEASLES	<input type="checkbox"/> SCARLET FEVER
<input type="checkbox"/> CHICKEN POX	<input type="checkbox"/> GERMAN MEASLES	<input type="checkbox"/> MUMPS	<input type="checkbox"/> TIBBITE FEVER
<input type="checkbox"/> DIABETES	<input type="checkbox"/> HEPATITIS	<input type="checkbox"/> POLIO	<input type="checkbox"/> TYPHOID FEVER
<input type="checkbox"/> DIPHTHERIA	<input type="checkbox"/> MALARIA	<input type="checkbox"/> RHEUMATIC FEVER	<input type="checkbox"/> WHOOPING COUGH

3. Does the learner suffer from any allergies? _____

YES	NO
-----	----

If yes, please give details _____

4. Does the learner have any special medical needs? _____

YES	NO
-----	----

If yes, please give details _____

5. Does or has the learner suffered from any other illnesses or disabilities? _____

YES	NO
-----	----

If yes, please give details _____

6. Is the learner receiving medical treatment for any condition _____

YES	NO
-----	----

If yes, please give details _____

7. Is or has the learner suffered from or received treatment for any psychological or emotional challenges? _____

Yes	No
-----	----

If yes, please give details _____

8. Has the learner had any operations? _____

Yes	No
-----	----

If yes, please give details _____

Please specify any other relevant medical details _____

SECTION 3: LEARNER'S MEDICAL DETAILS – CONSENT

In a critical medical situation, please bear in mind that there may not be time to refer to the learner's records. The school therefore reserves the right to utilise the quickest medical service available.

I, _____ being the parent / legal guardian of _____ hereby agree that a medical practitioner may provide emergency treatment as may be necessary.

SIGNATURE OF PARENT / LEGAL GUARDIAN _____

SECTION 4: DETAILS OF ANOTHER CONTACT IN THE CASE OF AN EMERGENCY

SURNAME _____ FULL NAMES as indicated in the ID DOCUMENT _____
 TEL H: _____ TEL W: _____ CELL: _____
 EMAIL ADDRESS (please write legibly) _____
 RELATIONSHIP: _____

SECTION 5: DETAILS OF FATHER / STEPFATHER / LEGAL GUARDIAN

Complete only if **NOT** the account holder. REFER TO SECTION 8.

SURNAME _____ FULL NAMES as indicated in the ID DOCUMENT _____
 DESIGNATION

MR	MRS	MS	MISS	DR	REV	PROF	OTHER	
----	-----	----	------	----	-----	------	-------	--

 IDENTITY NUMBER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 RELATIONSHIP _____ MARITAL STATUS _____
 OCCUPATION _____ EMPLOYER _____
 RESIDENTIAL ADDRESS _____ WORK ADDRESS _____ POSTAL ADDRESS _____

 TEL H _____ TEL W _____ CELL _____
 EMAIL ADDRESS (please write legibly) _____
 PARENTAL STATUS

Learner Living With Parent/S	Learner's Legal Guardian	Access Rights To Learner	Access Rights In An Emergency Only
------------------------------	--------------------------	--------------------------	------------------------------------

SECTION 6: DETAILS OF MOTHER / STEPMOTHER / LEGAL GUARDIAN

Complete only if **NOT** the account holder. REFER TO SECTION 8.

SURNAME _____ FULL NAMES as indicated in the ID DOCUMENT _____

DESIGNATION

MR	MRS	MS	MISS	DR	REV	PROF	OTHER	
----	-----	----	------	----	-----	------	-------	--

IDENTITY NUMBER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

RELATIONSHIP _____ MARITAL STATUS _____

OCCUPATION _____ EMPLOYER _____

RESIDENTIAL ADDRESS _____ WORK ADDRESS _____ POSTAL ADDRESS _____

TEL H _____ TEL W _____ CELL _____

EMAIL ADDRESS (please write legibly) _____

PARENTAL STATUS

Learner Living With Parent/s	Learner's Legal Guardian	Access Rights To Learner	Access Rights In An Emergency Only
------------------------------	--------------------------	--------------------------	------------------------------------

SECTION 7: DECLARATION OF PARENTS / LEGAL GUARDIANS

We, the undersigned, _____, hereby certify that the information given by us in this Application for Admission is complete and accurate. We also agree to the conditions as set out herein.

We understand that the prescribed number of learners per class may be exceeded through the placing of a current learner that has to repeat a grade.

This Application for Admission will be reconsidered in the case where important relevant information, which should be brought to the School's attention, is withheld.

We have read the Code of Conduct and Dress Code and will accept an offer of placement for our child at the School in accordance with the terms and conditions set out herein. We hereby acknowledge that the onus is on us to keep the school informed of any changes to any details or information provided in this document, in writing.

NB: The signature of both parents and / or legal guardians are required where applicable.

SIGNATURE OF FATHER / STEPFATHER / LEGAL GUARDIAN

DATE

SIGNATURE OF MOTHER / STEPMOTHER / LEGAL GUARDIAN

DATE

SECTION 8: DETAILS OF ACCOUNT HOLDER

SURNAME _____

FULL NAMES as indicated in the ID DOCUMENT _____

DESIGNATION _____

MR	MRS	MS	MISS	DR	REV	PROF	OTHER	
----	-----	----	------	----	-----	------	-------	--

IDENTITY NUMBER _____

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

RELATIONSHIP _____

MARITAL STATUS _____

OCCUPATION _____

EMPLOYER _____

RESIDENTIAL ADDRESS _____

WORK ADDRESS _____

POSTAL ADDRESS _____

TEL H _____

TEL W _____

CELL _____

EMAIL ADDRESS (please write legibly) _____

FEES for 2020

Registration Fee: **R300-00**:- NEW ENROLMENTS ONLY. Once off – non-refundable for new enrolments to secure a place at the school. -Payable together with the Annual School Administration Levy – **R755-00**
ANNUAL SCHOOL ADMINISTRATION LEVY – R755-00 FOR ALL REGISTRATIONS
 Pre-School (Grade RR and R) – Monthly payment **R800-00** (11 months)
 Primary School (Grade 1 – 7) – Monthly payment **R970-00** (11 months)
 Aftercare Fees- **R485-00** (10 months) (**Excluding June /July and December holidays**)
 Please note that a child registered during any date in a month, will be deemed to have enrolled from the 1st day of the month wherein enrolment takes place.

SECTION 9: DECLARATION OF ACCOUNT HOLDER

We, the undersigned, _____, hereby certify that the information given by the Account Holder in this Application for Admission is complete and accurate.

We accept joint and several liability to CITYKIDZ PRE & PRIMARY SCHOOL for the due and punctual payment of the once-off, non-refundable enrolment fee, school fees, and any other amounts which may become due and payable to the School in respect of participation in or attendance of any extracurricular activity.

We accept the Financial Terms and Conditions of which a copy has been kept.

NB: The signature of the Account Holder and that of a 2nd parent / a parent / or legal guardians are required where applicable.

SIGNATURE OF ACCOUNT HOLDER _____

DATE _____

SIGNATURE OF 2ND PARENT / A PARENT / LEGAL GUARDIAN _____

DATE _____

SIGNATURE OF AN AUTHORISED SCHOOL REPRESENTATIVE _____

DATE _____

SECTION 10: FINANCIAL TERMS AND CONDITIONS

1. ACCEPTANCE OF LIABILITY

- 1.1 The person responsible for the account (hereafter the Account Holder) as set out in the standard Application for Admission (hereafter the Application) herewith assumes liability for the account, alternatively binds him/herself as co-debtor and surety for payment of all fees to the School.
- 1.2 The legal guardian, as described in the Application, binds him/herself as surety and co-debtor for the payment of all legal fees by the Account Holder or any other payments that may arise from this Agreement.

2. TERMS OF PAYMENT

- 2.1 It is recorded that fees are determined at the beginning of the year and that the Account Holder is informed of the result in writing.
- 2.2 The Account Holder shall immediately inform the School if he/she has not received an invoice at the start of the academic year.
- 2.3 Fees for 11 (ELEVEN) months are payable monthly in advance by means of debit order on or before the 2nd (second) day of each calendar month or annually in advance by 31 December, depending on the fee payment option exercised by the Account Holder in the Application.
- 2.4 The School reserves the right to charge interest of 15% (fifteen per cent) on all accounts that are in arrears by 30 (thirty) days or longer.
- 2.5 Payment of monthly fees is not subject to presentation of a statement. Payments are made in accordance with the applicable fee structure of the School.
- 2.6 In the event where an existing account is / has not been managed in the proper manner, no further Applications will be considered.

3. BREACH OF CONTRACT

In the event where the undersigned surety, Account Holder or legal guardian commits a breach of contract of any of the terms of this Agreement, the School may in its sole discretion:

- 3.1 Refuse the learner entry to the School's premises until the breach has been remedied; or
- 3.2 Claim damages from the Account Holder and / or the surety and legal guardian; or
- 3.3 Take whatever legal steps that may be necessary.

4. GENERAL

This Agreement constitutes the whole Agreement between the parties relating to the subject matter hereof. No amendment or consensual cancellation of this Agreement or any provision or term thereof or of any Agreement, bill of exchange or other document issued or executed pursuant to or in terms of the Agreement and no settlement of any disputes arising under this Agreement and no extension of time, waiver or relaxation or suspension of any of the provisions or terms of this Agreement or of any Agreement, bill of exchange or other document issued pursuant to or in terms of this Agreement shall be binding unless recorded in a written document signed by the parties. Any such extension, waiver or relaxation or suspension which is so given or made shall be strictly construed as relating strictly to the matter in respect whereof it was made or given.

5. JURISDICTION

This Agreement is subject to South African law.

6. CREDIT INFORMATION

The Account Holder, surety or legal guardian hereby consents to the disclosure and exchange of personal financial information to a credit bureau or financial institution in accordance with the National Credit Act.

7. DOMICILIUM

The parties choose as their domicilium citandi et executandi the addresses set out in the Application.

8. LEGAL FEES

In the event where the School takes legal action against the Account Holder, he/she will be liable for all legal fees on an attorney client scale, collection costs and commission, interest and tracing fees.

9. CANCELLATION

9.1 The Account Holder undertakes to give 30 (thirty) calendar days written notice of termination of the enrolment of a learner, failing which the liability for the full amount of the following term's fees shall be owing.

9.2 The School shall be entitled to terminate the enrolment of any learner under the following circumstances:

9.2.1 Summarily, and with immediate effect, if the learner is guilty of any offence which, in the sole opinion of the School, renders his/her continued enrolment at the School impossible, in which event the Account Holder, after deduction of all amounts otherwise owing to the School, will be refunded a pro-rata proportion of any fees already paid in advance in respect of such learner.

9.3 In the event of emigration, which is a long process, the School requires 1 (one) full term's written notice in advance.

SIGNATURE OF ACCOUNT HOLDER

DATE

SECTION 11: GENERAL INDEMNITY

1. The School and its staff as well as the Board of Directors undertake to implement reasonable and generally acceptable measures with regard to the safety and well-being of all learners, educators and visitors to the School.
2. The School and its staff as well as the Board of Directors do not accept any responsibility for accidents, harm or loss that may take place in the class, on the school terrain.
3. Each parent is therefore requested to complete this form as proof that you accept the position of the School and its staff as well as the Board of Directors as set out above as well as the risks involved therewith.
4. I, _____, being the parent / legal guardian of _____ who is enrolled as such and accepted by the School, subject to the terms set out herein, indemnify the School and its staff as well as the Board of Directors for the time being of the CityKidz Pre and Primary School, Reg no. 2007/01450/03) for any injury, losses or damages in general, however they may occur, that I as parent / legal guardian of the above learner may suffer as a result of any occurrence whereby the learner may be involved, whether as the causing or suffering party, whilst participating in any school activity, except if such injury, loss or damage arises as a consequence of the gross negligence or wilful misconduct of the School and its staff as well as the Board of Directors or any person acting for or controlled by the School and its staff as well as the Board of Directors.
5. In particular, I authorise that the aforesaid learner may be involved in all excursions undertaken by his/her group or class during school days as part of his/her learning experience and where applicable, I agree that he/she may utilise the transport arranged by the School for such excursions. I also indemnify the School and its staff as well as the Board of Directors for any damages or losses that I as parent / legal guardian of the above learner may suffer under such circumstances and voluntarily accepts the risks associated therewith, except if such injury, loss or damage arises as a consequence of the gross negligence or wilful misconduct of the School and its staff as well as the Board of Directors or any person acting for or controlled by the School and its staff as well as the Board of Directors.
6. In the event of the aforesaid learner making use of the bus service to and from the School, I acknowledge that I am aware that such service is operated by an independent contractor and that neither the School and its staff as well as the Board of Directors accepts any responsibility therefore.

SIGNED AT _____ ON THIS _____ DAY OF _____

AS WITNESSES:

1. _____
2. _____

SIGNATURE OF PARENT / LEGAL GUARDIAN

SECTION 12: PERMISSION TO USE PHOTOGRAPHS

I understand and acknowledge that, from time to time, informal photographs are taken of the School's learners, but that, insofar as these photographs are placed in the possession or control of the School and its staff as well as the Board of Directors, these photographs might be used by the School and its staff as well as the Board of Directors in the electronic and/or printed media, newspaper advertisements, magazine advertisements, brochures, flyers, posters, billboards, banners, flippers and signage on buildings and vehicles, which use will be solely for purposes of marketing the School.

As all marketing material of the School portrays excellence, the School will at all times, insofar as the use and publication of photographs are placed in the control of the School ensure that these photographs are used in good taste.

SIGNATURE OF PARENT / LEGAL GUARDIAN

CityKidz Pre & Primary School Affordability Interview

OFFICE USE ONLY

This form must only be filled in by the Administration / Financial Department or Deputy Principal

Date : _____ / _____ / _____

Details of Parents/Guardians

Parent 1	
Parent 2	

Income

Total Income Parent 1	
Total Income Parent 2	

Total Income	
--------------	--

Less Expenses

Rent	
Car	
Insurance	
Telephone	
Clothing	
Groceries	
Other	
Other	
Other	
Total Expenses	

Income Less Expenses

Total School fees per month	
Balance	
Copy of Payslip	
Copy of Bank Statement	

Application Outcome:

Credit Vetting Clerk: Deputy Principal: Principal: Date: _____ / _____ / _____	School Stamp
-----------------------------------------------------------------------------------------------------	--------------

CITYKIDZ PRE & PRIMARY SCHOOL

REQUIREMENTS UPON APPROVED REGISTRATION

CHECKLIST	TICK
1. Completed application form. (Including supporting documents)	
2. An affordability interview will be conducted by Principal or appointed secretarial staff	
3. Registration fee deposit and first month's school fees into bank account	
4. Proof of payments must be forwarded to the school using one of the alternatives : copy by hand, fax or e-mail	

FEES for 2020

REGISTRATION FEE: **R300-00:- NEW ENROLMENTS ONLY**. Once off – non-refundable for new enrolments to secure a place at the school. -Payable together with the Annual School Administration Levy – **R755-00**
ANNUAL SCHOOL ADMINISTRATION LEVY – **R755-00** FOR ALL REGISTRATIONS
Pre-School (Grade RR and R) – Monthly payment **R800-00** (11 months)
Primary School (Grade 1 – 7) – Monthly payment **R970-00** (11 months)
Aftercare Fees- **R485-00** (10 months) (**Excluding June /July and December holidays**)
Please note that a child registered during any date in a month, will be deemed to have enrolled from the 1st day of the month wherein enrolment takes place.

NOTICE:

- I. Registration and 1st month school fee must be paid before the learner will be accepted into a class.
- II. Parents need to receive a Reference number from the school via SMS or telephonically before paying any school fees into the bank account.
- III. Parent/s / guardian or person/s legally entitled to custody of the child will receive an invoice/statement at the end of every month.
- IV. Parents/Guardians really need to regard school fees as a priority in order to enjoy the excellent services the school provides.
- V. All monies received are allocated at the school's discretion.
- VI. Children are allocated to classes solely at the school's discretion. The school reserves the right to change, replace, and/or rotate all staff and/or to assign or reassign children to classes, without notice.

CityKidz School is a private school, and is not subject to the Government School Regulations.

CityKidz Pre & Primary School banking details

FNB- First National Bank

ACCOUNT NUMBER : 62549374974

BRANCH NUMBER : 204109
(RMB Corporate Banking Cape Town)

UNIFORM REQUIREMENTS

UNIFORM SUPPLIERS

Settler's Store is located at 93 Broadway(Albertina Sisulu), Bez Valley. Tel. 011 615 1350.

Girls Summer	Girls Winter
Tartan Skort (Looks like a skirt but are shorts)	Tartan Skort (Looks like a skirt but are shorts) to be worn with tights in winter or Long grey trousers
Golf Shirt with tartan design and school badge	Long-sleeved Golf Shirt tartan design and school badge
Navy short socks	Long Navy Socks or Navy Tights
CityKidz School sleeveless V-neck pullover (OPTIONAL)	Navy Woollen Tights if wearing the tartan skort
CityKidz School jersey long sleeves	CityKidz School jersey long sleeves
CityKidz School Blazer Navy Royal COMPULSORY Grade1-7	CityKidz School Blazer Navy Royal COMPULSORY Grade 1-7
CityKidz Sun Hat	
CityKidz tracksuit	Official CityKidz Windbreaker (with school badge) fleece line inner and tartan design (OPTIONAL)
Black school shoes for Summer and Winter	CityKidz tracksuit
Boys Summer	Boys Winter
Short grey trousers	Long grey trousers
Golf Shirt with tartan design and school badge	Long-sleeved Golf Shirt tartan design and school badge
Plain Navy blue socks	Plain Navy Blue socks
CityKidz School jersey long sleeves	CityKidz School jersey long sleeves
CityKidz School sleeveless v-neck pullover (OPTIONAL)	CityKidz School sleeveless v-neck pullover (OPTIONAL)
CityKidz School Blazer Navy Royal	CityKidz School Blazer Navy Royal
CityKidz tracksuit	CityKidz tracksuit
Black school shoes for Summer and Winter	Official CityKidz Windbreaker (with school badge) fleece line inner and tartan design (OPTIONAL)
Physical Education PET. House coloured T-Shirts /Navy Shorts and BLACK takkies	Physical Education PET. House coloured T-Shirts/ Navy Shorts and BLACK takkies
CityKidz SCHOOL BAG S/L/XL-COMPULSORY	CityKidz SCHOOL BAG S/L/XL COMPULSORY
CityKidz Sun Hat	