



# BAVA INTERNATIONAL SCHOOL

CNR TAURAMA RD & TURUA AVE, MANU AUTOPORT, BOROKO  
PO BOX 5398, BOROKO, NATIONAL CAPITAL DISTRICT  
PAPUA NEW GUINEA

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FAX: (+675) 325 8197 WEBSITE: [www.bavaschool.com](http://www.bavaschool.com)

ELEMENTARY | PRIMARY | PRESCHOOL | CHILD CARE SERVICES

## 2 0 2 1 E N R O L M E N T F O R M

### **Name of children and date of birth:**

Child 1: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Sex: \_\_\_\_ Nationality: \_\_\_\_\_

Child 2: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Sex: \_\_\_\_ Nationality: \_\_\_\_\_

Child 3: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Sex: \_\_\_\_ Nationality: \_\_\_\_\_

### **Parent/Guardians occupation & addresses:**

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

Lot No: \_\_\_\_\_ Sec. No: \_\_\_\_\_ Location: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_

Lot No: \_\_\_\_\_ Sec. No: \_\_\_\_\_ Location: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

### **Please specify a contact in case of emergency:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship To The Child: \_\_\_\_\_

### **Does your child suffer from any occurring illnesses? If YES, please provide details:**

\_\_\_\_\_  
\_\_\_\_\_

Your Doctor's Name: \_\_\_\_\_ Tel : \_\_\_\_\_

Address: \_\_\_\_\_

In case of emergency, I/We give permission for my/our child to be taken to the above-mentioned doctor.

SCHOOL REGISTRATION NO. PS-298/83

A certified school of the Department of Education. Call us now and enrol your child with us.



# SCHOOL FEE PAYMENT POLICY

## TERMS AND CONDITIONS

- Registration/Enrolment Fee is NON-REFUNDABLE. This must be paid with the term/year school fees.
- No child is given access to the school until their assigned fees are paid in full.
- No refunds are permitted once enrolled for the school year, unless the paying parent/guardian is transferred to another Province or some other unforeseen and unfortunate circumstance has occurred.
- If the child has been medically certified ill and can no longer attend school, a refund may be considered at the principal's discretion.
- If fees are paid by term instalments, a grace period of only two weeks into the new term is permitted. Failure to pay outstanding term fees in full after this period will see your child suspended from classroom programs and the school environment.
- If the payment was made by the paying parents' or guardian's employer, any refund will be made to the employer/company, only after meeting the above criteria.
- One month's notice in writing must be provided to the school prior to withdrawing a student's enrolment.

I/We have read and clearly understood the above terms and conditions of the School Fee Payment Policy and hereby agree to abide by them during this current school year of 2021.

**(MUST BE SIGNED BY THE PERSON RESPONSIBLE FOR PAYING THE SCHOOL FEES)**

Signed by Parent/Guardian: \_\_\_\_\_

Witnessed and signed by officer in attendance: \_\_\_\_\_

Principal/Registrar: \_\_\_\_\_ Date: \_\_\_\_\_

## OFFICE USE ONLY - PAYMENT METHOD

Bank cheque or cash payment (personal cheques will not be accepted).

A deposit of **K300.00** upon enrolment is required.

Details: \_\_\_\_\_

Company Address: \_\_\_\_\_

ENROLMENT FEE PAID: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_\_

SCHOOL FEE:  
K \_\_\_\_\_

ANNUAL:  
K \_\_\_\_\_

INSTALMENT:  
K \_\_\_\_\_