



HRC 2025 ENROLMENT APPLICATION

GRADE APPLYING FOR: _____ Please initial all pages

LEARNER INFORMATION: (Please print clearly)

SURNAME:	FIRST NAMES:
GENDER:	DATE OF BIRTH:
POSITION IN FAMILY _____ OUT OF _____	IDENTITY/PASSPORT No.
PLACE OF BIRTH:	RACE:
HOME LANGUAGE:	CITIZENSHIP:
HOME ADDRESS:	
	POSTAL CODE:

FAMILY INFORMATION

FATHER'S DETAILS: (Please print clearly)

SURNAME:	NAME:
IDENTITY/PASSPORT No	OCCUPATION:
EMPLOYER:	
WORK PHONE:	CELL PHONE:
EMAIL ADDRESS:	MARITAL STATUS:

MOTHER'S DETAILS: (Please print clearly)

SURNAME:	NAME:
IDENTITY/PASSPORT No	OCCUPATION:
EMPLOYER:	
WORK PHONE:	CELL PHONE:
EMAIL ADDRESS:	MARITAL STATUS:

GUARDIAN'S DETAILS: (Please print clearly) (if the child is not living with parents):

SURNAME:	NAME:
IDENTITY/PASSPORT No	OCCUPATION:
EMPLOYER:	
WORK PHONE:	CELL PHONE:
EMAIL ADDRESS:	MARITAL STATUS:

Initials _____



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ALTERNATIVE CONTACT'S DETAILS: (Please print clearly)

1.	NAME SURNAME:	RELATIONSHIP TO CHILD
	WORK PHONE:	CELL PHONE:
2.	NAME SURNAME:	RELATIONSHIP TO CHILD
	WORK PHONE:	CELL PHONE:

MEDICAL DETAILS

NAME OF DOCTOR:	CONTACT NO:
MEDICAL AID:	MEDICAL AID NO:
MEMBERSHIP NO:	MAIN MEMBER:

BROTHER'S & SISTER'S IN THE SCHOOL

1.	NAME SURNAME:	GRADE:
2.	NAME SURNAME:	GRADE:

ACCOUNT DETAILS

PERSON RESPONSIBLE FOR ACCOUNT:	
ID NO:	CELL NO:
ADULT RESPONSIBLE FOR COLLECTION:	
ID NO:	CELL NO:

PRESENT SCHOOL RECORD

SCHOOL NAME:	CONTACT NO:
EMAIL ADDRESS:	MEDICAL AID NO:
HAS YOUR CHILD EVER REPEATED A GRADE?	
HAS YOUR CHILD BEEN DIAGNOSED WITH (ADD OR ADHD) OR ANY OTHER LEARNING DIFFICULTY? YES / NO If YES, explain what course of action is being followed:	
WHAT GRADE IS YOUR CHILD CURRENTLY IN?	
HOW DID YOU HEAR ABOUT HOPE RESTORATION COLLEGE?	

Initials _____



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DOCUMENTATION TO BE ATTACHED WITH APPLICATION

CERTIFIED COPIES OF BOTH PARENTS' IDs
CERTIFIED COPY OF BIRTH CERTIFICATE
LATEST COPY OF RATES ACCOUNT/COPY OF YOUR CURRENT SIGNED RESIDENTIAL LEASE AGREEMENT
LATEST SCHOOL REPORT
WRITTEN TESTIMONIAL FROM PREVIOUS SCHOOL
TWO ID SIZED PHOTOS OF THE CHILD
DIAGNOSTIC TESTING & REGISTRATION FEES (NON-REFUNDEBABLE)

Diagnostic testing may need to be completed by the student at the school at a cost to be determined by the school. The cost is non refundable and does not guarantee acceptance

STATEMENT OF FAITH

Since Hope Restoration College is a Ministry of the Kingdom of God, this statement of Faith forms the basis of our confession of Faith:

- We believe in the Godhead, the incomprehensible Trinity: God the Father, the Son and the Holy Spirit.
- We believe in Salvation ONLY through our Lord Jesus Christ, who came into this earth to give His life a ransom for many.
- We believe in the Holy Spirit (the third person in the Trinity) and His gifts to the church, which should be desired by every believer.
- We believe in the Holy Bible / Scriptures as the only infallible, authoritative Word of God.
- We believe man was created holy and upright, but through sin came under God's condemnation and could not save his soul. It was only through Jesus Christ's death, resurrection and ascension that brought redemption to all mankind.
- We believe in Water Baptism which symbolises our dying to the "old man" and the resurrection of the "new man" to walk in "newness of life".
- We believe in the baptism of the Holy Spirit, which should be accompanied by the gift of speaking in tongues as stated in the scriptures.
- We believe in the Lord's Supper, the sacrament instituted by the Lord Himself, which should be practised until His Second Coming.
- We believe in miracles and divine healing, that both are gifts of the Holy Spirit given to the church for the profit of all.

Initials _____