



DOWN SYNDROME ASSOCIATION PRETORIA/TSHWANE  
 54 HOFMEYER STREET LYTTTELTON  
[www.downsyndromepretoria.co.za](http://www.downsyndromepretoria.co.za)  
 dsat@downs.org.za  
 TEL: 012 - 664 8871  
 FI NR 01 1005370016  
 PBO 930001655  
 NPO 000-362

## LITERACY PROGRAMME

DETAILS CONCERNING THE LEARNER	
Date	
Surname	
Full name	
Name used	
Date of birth	
Age	
Gender	
Residential Address	
Postal address	
Telephone Home	
E-mail	
Emergency Contact	
Alternative Emergency Contact	

**Banking details:** Down Syndrome Association Pretoria / Tshwane,  
 ABSA bank, Br code 632005, Cheque account 1500280537

The use of the logo, name and NPO no id Down Syndrome Association of Tshwane is deemed unauthorised, unless prior written approval was received

AVAILABLE DAY	TIME
<b>1<sup>ST</sup> SATURDAY OF EACH MONTH</b>	8H00-9H00
	9H00-10H00
	10H00-11H00
	11H00-12H00
	12H00-13H00
<b>2<sup>nd</sup> SATURDAY OF EACH MONTH</b>	8H00-9H00
	9H00-10H00
	10H00-11H00
	11H00-12H00
	12H00-13H00
<b>3<sup>rd</sup> SATURDAY OF EACH MONTH</b>	8H00-9H00
	9H00-10H00
	10H00-11H00
	11H00-12H00
	12H00-13H00
<b>4<sup>th</sup> SATURDAY OF EACH MONTH</b>	8H00-9H00
	9H00-10H00
	10H00-11H00
	11H00-12H00
	12H00-13H00

Please indicate **preferred day** and time below:

Day: \_\_\_\_\_

Timeslot: \_\_\_\_\_

Please note that we will do our utmost to take your preference into consideration, however it is dependent on the amount of students that sign up.

**Cost will be R50 per session, payable on or before each session. Cancellation must be done at least 48 hours prior to session otherwise full fee will be charged.**

Signed at Pretoria on this ----- day of -----20-----

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SIGNATURE OF PARENT/GUARDIAN

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INITIALS AND SURNAME