

**THE HERITAGE EDUCATION SCHOOLS OUTREACH PROGRAMME
2017**

Name of secondary school	
Private or public school	
Rural or urban school	
If a public school, please indicate quintile	
Province	
District	
Name of principal/responsible teacher	
School postal address	
Email address	
Tel numbers	Cellphone: Landline: ()
Fax number	

PERSONAL DETAILS OF LEARNER 1

Initials & Full names	Initials: Names:
Surname	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female (Please <input checked="" type="checkbox"/> the appropriate box) Grades (8-11)
Identity number	Age:
Email address	
Cellphone number	
Landline number	

PERSONAL DETAILS OF LEARNER 2

Initials & Full names	Initials: Names:
Surname	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female (Please <input checked="" type="checkbox"/> the appropriate box) Grades (8-11)
Identity number	Age:
Email address	
Cellphone number	
Landline number	

PERSONAL DETAILS OF LEARNER 3

Initials & Full names	Initials: Names:
Surname	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female (Please <input checked="" type="checkbox"/> the appropriate box) Grades (8–11)
Identity number	Age:
Email address	
Cellphone number	
Landline number	

PERSONAL DETAILS OF LEARNER 4

Initials & Full names	Initials: Names:
Surname	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female (Please <input checked="" type="checkbox"/> the appropriate box) Grades (8–11)
Identity number	Age:
Email address	
Cellphone number	
Landline number	

We hereby agree that the organisers will not be held liable for any loss, damage, delays, illness or whatever other mishaps that might be occasioned during our stay in the provinces or Pretoria for the duration of the district, provincial or national rounds of the competition.

Signature:**Principal/Responsible Teacher****SCHOOL STAMP**