Orlando Seventh Day
Adventist Primary School

P.O. Box 151
Orlando
1803

8032 Bacela Street
Orlando West
Soweto 1804

Tel No. (011) 936-1389
Fax No. (011) 536-2924
Reg. 132662

ENTER TO LEARN
DEPART TO SERVE

APPLICATION FOR ADMISSION 2027

PLEASE COMPLETE THIS FORM IN CAPITAL LETTERS AND ATTACH THE FOLLOWING DOCUMENTS:

- **Birth Certificate – Certified Copy**
- **Immunization card – Certified Copy**
- **Report –2nd Term Report**
- **Transfer letter**
- **2 I.D photos**
- **2 1.D copies of learners parents – certified.**

PLEASE NOTE: A DEPOSIT SLIP OF R 3000.00 SHOULD BE SUBMITTED TOGETHER WITH THIS FORM AS PROOF OF PAYMENT, AS EARLY AS POSSIBLE.IF SUBMITTED LATE WE OFFER NO GUARANTEES FOR ADMISSION AND THE R3000.00 IS NON REFUNDABLE.

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