



Parent & Student Information Form

All fields required before lessons begin

SECTION 1: STUDENT DETAILS

- Full Name: _____
- Preferred Name: _____
- Date of Birth (DD/MM/YYYY): _____
- Gender: _____
- Home Language: _____
- Current Grade Level (actual or equivalent): _____
- Curriculum (tick):
 - ☐ CAPS
 - ☐ Cambridge
 - ☐ GED
 - ☐ SATs
 - ☐ Other: _____
- Current School / Online Provider (if any):



- Has the student repeated any grades?

☐ Yes ☐ No

If yes, which grade(s)? _____

- Has the student been formally assessed for learning barriers/diagnoses?

☐ Yes ☐ No

If yes, provide details or attach reports:

SECTION 2: PARENT/GUARDIAN DETAILS

Primary Parent/Guardian

- Full Name: _____

- ID Number: _____

- Relationship to Student: _____

- Email Address (primary communication): _____

- Phone Number: _____

- Alternative Phone: _____

- Residential Address:

Secondary Parent/Guardian (Optional)

- Full Name: _____



- Relationship: _____
 - Phone: _____
 - Email: _____
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SECTION 3: EMERGENCY DETAILS

- Emergency Contact (not a parent): _____
- Relationship: _____
- Phone Number: _____
- Medical Aid (if applicable): _____
- Medical Aid Number: _____
- Family Doctor & Practice: _____
- Doctor's Contact: _____

Medical & Safety Information

(Important for group/onsite lessons)

- Known Allergies: _____
- Chronic Conditions: _____
- Medications Taken Daily: _____



- Any behavioural or emotional considerations?

 - Any academic barriers, reading/writing difficulties?

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SECTION 4: LEARNING CONTEXT & SUPPORT NEEDED

- Reason for seeking tutoring:

 - Subjects requiring support:
 - ☐ English
 - ☐ Mathematics
 - ☐ Science
 - ☐ Reading & Writing
 - ☐ Study Skills
 - ☐ Other: _____
 - Do parents assist with homework/assignments at home?
☐ Yes ☐ No ☐ Sometimes
 - Student's biggest academic challenges:

 - Student's strengths or interests:

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SECTION 5: TRANSPORT, COLLECTION & SAFETY

- Who may collect the student from lessons?
 1. _____
 2. _____
 3. _____



- Any restrictions on who may NOT collect the student?

- Does the child travel alone via transport service?

☐ Yes ☐ No

Provider name/driver: _____

SECTION 6: AGREEMENT CONFIRMATION

I confirm that all information provided is true and accurate.

Parent/Guardian Signature: _____

Date: _____

POPIA (PRIVACY PROTECTION) AGREEMENT

STUDY WITH SADIE

POPIA Compliance & Data Privacy Agreement

This agreement outlines how personal data is collected, stored, processed, and protected by **Study With Sadie (SWS)** in compliance with the **Protection of Personal Information Act, Act 4 of 2013** ("POPIA").

1. PURPOSE OF COLLECTING PERSONAL INFORMATION



Study With Sadie collects personal and academic information solely to:

- Provide educational services
- Track academic progress
- Communicate effectively with parents
- Ensure student safety
- Comply with safeguarding and legal requirements
- Maintain administrative and billing records

No unnecessary information is collected.

2. WHAT INFORMATION IS COLLECTED

Information may include:

- Parent/guardian contact details
- Student demographics
- Academic records and learning history
- Medical or emergency information
- Payment and billing information
- Signed agreements and consent forms



- Communication records (email/WhatsApp)
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3. STORAGE OF INFORMATION

All personal information is stored:

- Digitally in password-protected files
- In encrypted cloud storage
- In locked filing systems (paper records)

Only the tutor (Sadie Kruger) has access.

4. HOW INFORMATION IS USED

Information may be used for:

- Lesson planning
- Tracking progress
- Reporting to parents
- Scheduling
- Safety management
- Curriculum placement



- Payment and invoicing
- Internal training and service quality development

Information will **never** be sold, shared, or made public.

5. THIRD-PARTY DISCLOSURE

Information will **only** be shared with:

- Emergency medical staff (in case of incident)
- External assessors (if parents request it)
- Law enforcement (if legally required)

No commercial third parties receive any information.

6. PARENT AND STUDENT RIGHTS

You have the right to:

- Request access to your personal records
- Correct inaccurate information
- Withdraw consent (with notice)
- Request deletion of data (if no longer required legally)



7. DATA RETENTION PERIODS

Records are kept:

- For **5 years** after service termination
- Or longer if legally required
- After which they are securely erased or destroyed

8. CONSENT FOR DIGITAL STORAGE & COMMUNICATION

By signing, you consent to:

- Communications via WhatsApp, SMS, email
- Storage of data in cloud systems
- Tutor keeping necessary academic records

Parent/Guardian Acknowledgement

I hereby consent to the collection, storage, and processing of my and my child's information by **Study With Sadie** in accordance with POPIA.



Parent/Guardian Name: _____

Signature: _____

Date: _____

INDEMNITY, LIABILITY WAIVER & RISK AGREEMENT

STUDY WITH SADIE

Indemnity & Risk Agreement

This form protects both the tutor and the student during lessons, activities, online learning, and group sessions.

1. GENERAL INDEMNITY

I, the parent/guardian, acknowledge that **Study With Sadie** will take all reasonable precautions for my child's safety during lessons. However:

I agree that **Study With Sadie is not liable** for:

- Accidents
- Injuries
- Loss or theft of personal belongings
- Harm resulting from undisclosed medical conditions



- Transport-related incidents
- Behavioural incidents beyond reasonable supervision

Parents accept responsibility for the student before and after lessons.

2. TRANSPORT LIABILITY

If the student:

- Travels via Uber/taxi
- Is dropped off by a third-party driver
- Walks alone
- Uses private transport services

Study With Sadie holds **no responsibility** for transport risks, delays, or safety outside lesson premises.

3. ONLINE LEARNING & DEVICE SAFETY

Parents are responsible for:

- Ensuring stable internet
- Ensuring safe device use



- Monitoring online access outside lesson hours
- Providing functioning headphones/webcam where needed

Study With Sadie does not take responsibility for device damage or connectivity issues.

4. BEHAVIOUR & PARTICIPATION

- Students must follow instructions, behave respectfully, and participate in lessons.
 - Disruptive conduct may lead to removal from a session.
 - No refunds apply under disciplinary action.
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5. EMERGENCY CARE CONSENT

In case of emergency:

- SWS may administer basic first aid
 - SWS may contact paramedics/doctors
 - Parents remain financially responsible for all medical costs
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6. ACCEPTANCE OF RISK



I acknowledge that:

- Learning environments carry inherent risks
- Group classes involve movement, interaction, and materials
- The tutor cannot control all variables at all times

I accept all reasonable risks involved in participation.

Parent/Guardian Signature

Name: _____

Signature: _____

Date: _____