



STARQUALITY  
PERFORMING ARTS COLLEGE

**Student details :**

Name ( As per ID )	
Surname ( As per ID )	

**Title:**

<u>MR</u>		<u>MS</u>		<u>Miss</u>	
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**Sex**

<u>M</u>		<u>F</u>	
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**I.D number:**

ID number	
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Passport no:	
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<b><u>Registration fee paid</u></b>	EFT      Cash	<b><u>Date:</u></b>
<b><u>Accepted by</u></b>		<b><u>Date:</u></b>

T-Shirt Size .....

Name of course .....

Nationality .....

Ethnicity .....

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Accreditation no: 613/P/000005/2019



**Contact details:**

Cell phone number:		Back up number:	
Email address:			
Next of kin name:		Contact:	
Next of Kin Name:		Contact:	

Allergies / Medical conditions:

(Ensure the student brings any medical device to class i.e. asthma pump, epinephrine pen, insulin etc.)

Doctors details & number:

.....

Medical Aid name and no:

.....

I hereby give consent to the Star Quality management team to make decisions regarding the students well-being in case of Medical Emergency should the guardians/parents be unavailable

Student Signature.....

Date: .....

Parent/guardian signature ( if student is under 18 years of age) .....

Date.....

***\*please return this form fully completed to our head office 22 Niger Road Emmerantia or email it to [admin@starquality.co.za](mailto:admin@starquality.co.za) with proof of your registration fee. For any further queries please call us on 0110365666***

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**Educational History** (please attach a certified copy of your matric certificate/SQA accredited equivalent):

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Name of school where grade 12 was attained..... year of completion.....

Have you previously studied at a tertiary institution  Y  N

**If yes-** Please state name of institution.....Student Number.....

Qualification: .....Qualification attained  Y  N

**If yes** – year attained..... ( Attached certified copy of academic transcript)

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**Check list:**

Certified copy of ID ( If South African Citizen)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Certified copy of ID book of person responsible for payment of account	<input type="checkbox"/> Y	<input type="checkbox"/> N
Certified copy of study permit and your passport ( If not South African Citizen)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Certified copy to your results for latest school year completed- Grade 11 or Matric ( Grade 12)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Foreign School Results, as Assessed by the South African Matriculation Board ( If Applicable)	<input type="checkbox"/> Y	<input type="checkbox"/> N

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**Account payer details:**

**Account payer 1**

Title: ( Mr,Mrs,Miss,Ms) ..... Relationship to Student .....

First name ( As per ID ) ..... Surname ( As per ID ) .....

ID no

Cell no. .... Email .....

Employer name .....

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residential Address:		
	Postal Code:	

Postal Address:		
	Postal Code:	

I ( Full Name of Account payer as per ID) ,.....

ID no .....

I hereby Declare that this registration is being made with my permission and that I hereby bind myself guarantor for the fulfilment of the students obligation as a result of this agreement. I, undersigned have read, completed and understood the entire contents of this registration form/contract and hereby jointly and severally accept all terms and conditions. I hereby accept/consent to him/her undertaking the said lesson(s), and commit myself as surety and co-principal debtor of the fees and accept all the conditions as described herein before.

Account Payer Signature ..... Date .....

**Account payer 2**

Title: ( Mr,Mrs,Miss,Ms) ..... Relationship to Student .....

First name ( As per ID ) ..... Surname ( As per ID ) .....

ID no

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Cell no. .... Email .....

Employer name .....

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residential Address:	
	Postal Code: <input type="text"/>

Postal Address:	
	Postal Code: <input type="text"/>

I ( Full Name of Account payer as per ID) ,.....

ID no .....

I hereby Declare that this registration is being made with my permission and that I hereby bind myself guarantor for the fulfilment of the students obligation as a result of this agreement. I, undersigned have read, completed and understood the entire contents of this registration form/contract and hereby jointly and severally accept all terms and conditions. I hereby accept/consent to him/her undertaking the said lesson(s), and commit myself as surety and co-principal debtor of the fees and accept all the conditions as described herein before.

Account Payer Signature ..... Date .....

**Star Quality Performing Arts College banking Details:**

<b>First National Bank Rosebank</b>
<b>Branch Code: 250655</b>
<b>Account no: 62439149974</b>
<b>REFERENCE!!!! Please insert your student name and Surname or invoice number!</b>

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**Payment options:**

\*\* If no choice is indicated, or if you should fail to honour any option by the commencement dates specified, you will automatically be billed for option C. Non South African Citizens may only select Option A or option B.

<b>Registration fee needs to be paid by the time you hand/email this form. Please tick to acknowledge payment</b>		
Registration for Fulltime acting programme and Part time acting programme R 3000 <b><u>including your textbooks</u></b>		<b>R3000</b>
Registration for short acting programme R 1500		<b>R 1500</b>
<b>Tick Payment option below</b>		
<b>Option A</b>	<u><b>Full acting programme:</b></u> <ul style="list-style-type: none"> <li>• 10X Monthly payments R 4500</li> </ul>	
<b>Option B</b>	<u><b>Full time acting programme:</b></u> <ul style="list-style-type: none"> <li>• Payment per term – 4X payments of R 11 250</li> </ul>	
<b>Option C</b>	<u><b>Full acting programme:</b></u> <ul style="list-style-type: none"> <li>• Payments per semester – 2X payments of R 22 500</li> </ul>	

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<b>Option D</b>	<u><b>Full Time acting programme:</b></u> <ul style="list-style-type: none"> <li>• Full once off payment – R 45 000</li> </ul>	
	<u><b>Online acting programme:</b></u>  Registration fee R1500  ( **Thereafter 3 monthly Instalments of R 1800 per month )  <b>Tuition Total fee for the 3 months:</b> <p style="text-align: center;"><b>R6900</b></p>	
	<u><b>Short Acting programme:</b></u>  Registration fee R1500 ( **Thereafter 3 monthly Instalments of R 2000 per month )  <b>Tuition Total fee for the 3 months:</b> <p style="text-align: center;"><b>R7500</b></p>	

\*\* please also be advised that the registration fee is non- refundable

Please sign for your payment option selection :

Account payer 1 ..... Date .....

Account payer 2 ..... Date .....

Student Signature ..... Date .....

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