

Stand No 1122 Sandriver Trust
 Hazyview, Mpumalanga
 Tel: 066 238 2296 / 082 935 2502
 Email: bethelprecreche@gmail.com
 NPO No: 080-219 | EMIS No: 801000042



SECTION 1: Learner Details

Full Name:	Bokang Dibakwane	Date of Birth:	2022-04-15
Age:	4	Gender:	M
ID Number (if available):		Home Language:	Sesotho
Current Class:		First Day of Attendance:	

SECTION 2: Parent / Guardian Information

Parent/Guardian 1 - Full Name:	Tiny Dibakwane	Relationship to Learner:	Parent
ID Number:	8906120299086	Occupation:	
Phone Number:	0731323243	Alternative Contact:	0764347327
Email Address:		Residential Address:	
Parent/Guardian 2 - Full Name:		Relationship to Learner:	
ID Number:		Occupation:	
Phone Number:		Alternative Contact:	
Email Address:		Residential Address:	

SECTION 3: Emergency & Medical Information

Emergency Contact Name:		Contact Number:	
Relationship to Learner:		Family Doctor:	
Doctor's Contact Number:		Medical Aid (Yes/No):	
Medical Aid Name:		Medical Aid Number:	
Allergies / Medical Conditions:			
Medication currently taken:			

SECTION 4: Collection & Transport

Authorized Persons to Fetch Learner (Name & ID):	Smanga
Transport Method (Parent/Transport/Walk):	
If using school transport, Route/Driver Name:	

Stand No 1122 Sandriver Trust
Hazyview, Mpumalanga
Tel: 066 238 2296 / 082 935 2502
Email: bethelprecreche@gmail.com
NPO No: 080-219 | EMIS No: 801000042



SECTION 5: Consents

	Yes/No
I consent to medical treatment in case of emergency	Yes
I allow my child to appear in group photos for internal use	Yes
I confirm all information is true and correct	Yes
I have received and understood the crèche rules and policies	Yes

Parent/Guardian Signature: DIBAKS Date: 14/01/2026 Admin Signature
Admin Signature (Office Use): [Signature] Date: 14/01/2026

SECTION 6: Referral

How did you hear about Bethel Crèche?

- Referred by a parent or guardian
- Referred by a staff member
- Social media / Online
- Saw the signage or school
- Other: _____

If referred, please provide the FULL NAME of the person who told you about Bethel Crèche:

What is your relationship to that person?

- Family
- Friend
- Crèche staff member
- Other: _____

Did this person personally help you register or bring you to the crèche?

- Yes
- No

Signature of Parent/Guardian: DIBAKS Date: 14/01/2026

NOTICE OF PERSONAL PARTICULARS

1. Any changes to the personal particulars in your ID Book must be communicated to all relevant parties.

NOTICE OF CHANGE OF ADDRESS

1. Keep the NOTICE OF CHANGE OF ADDRESS form in this pocket to report a change of address or a change in particular of your present address e.g. name of street and/or street number etc.
2. Hand in at or post to the nearest regional/district office of the DEPARTMENT OF HOME AFFAIRS

I.D. No. 890612 0299 086



S.A. CITIZEN

SURNAME
DIBAKWANE

FORENAMES
TINY

COUNTRY OF BIRTH
SOUTH AFRICA

DATE OF BIRTH
1989-06-12



DATE ISSUED
2014-05-12

ISSUED BY AUTHORITY OF
THE DIRECTOR-GENERAL
HOME AFFAIRS

Clinic Visits

Age	Date	Feeding advice p4	Growth monitoring p9	Development p23	Head circumference p25	Immunisation p27	Vitamin A p28	Deworming p28	Oral Health p29	TB screen p40	Consider HIV p40	Next date
3 - 6 days	19/4/22	✓	✓	/	/	/	/	/	/	/	/	
6 weeks	27/5/22	✓	✓	/	/	✓	/	/	/	✓	✓	27/8/22
10 weeks	24/6/22	✓	✓	/	/	✓	/	/	/	✓	✓	24/6/22
14 weeks	22/7/22	✓	✓	✓	✓	✓	/	/	/	✓	✓	22/7/22
4 months				/	/	/	/	/	/	✓	✓	17/10/22
5 months				/	/	/	/	/	/	/	/	
6 months	17/10/22	✓	✓	✓	✓	✓	/	/	✓	✓	✓	17/11/2023
7 months				/	/	/	/	/	/	/	/	
8 months				/	/	/	/	/	/	/	/	
9 months	17/1/23	✓	✓	✓	✓	✓	/	/	✓	✓	✓	17/4/23
10 months				/	/	/	/	/	/	/	/	
11 months				/	/	/	/	/	/	/	/	
12 months	17/4/23	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	16/10/23
14 months				/	/	/	/	/	/	/	/	
16 months				/	/	/	/	/	/	/	/	
18 months	16/10/2023	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	11/12/2024
20 months				/	/	/	/	/	/	/	/	
22 months				/	/	/	/	/	/	/	/	
2 years	15/01/24	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
2 and a half years		/	/	/	/	/	/	/	/	/	/	
3 years		/	/	/	/	/	/	/	/	/	/	
3 and a half years		/	/	/	/	/	/	/	/	/	/	
4 years		/	/	/	/	/	/	/	/	/	/	
4 and a half years		/	/	/	/	/	/	/	/	/	/	
5 years		/	/	/	/	/	/	/	/	/	/	
6 years		/	/	/	/	/	/	/	/	/	/	
12 years		/	/	/	/	/	/	/	/	/	/	

tick once done

Not in schedule



home affairs

Department:
Home Affairs
REPUBLIC OF SOUTH AFRICA

H 4342899

83/DHA - 5



PARTICULARS FROM THE POPULATION REGISTER I.R.O.

BIRTH CERTIFICATE

CHILD SURNAME: DIBAKWANE
FORENAMES: BOKANG HLULANI
IDENTITY NUMBER: 2204155411081

GENDER: MALE
DATE OF BIRTH: 2022-04-15
PLACE OF BIRTH: MAPULANENG
COUNTRY OF BIRTH: SOUTH AFRICA

MOTHER: DIBAKWANE
IDENTITY NUMBER : 8906120299086

MAIDEN/SURNAME: DIBAKWANE
FORENAMES: TINY

DATE OF BIRTH: 1989-06-12
PLACE OF BIRTH: BUSHBUCKRIDGE
COUNTRY OF BIRTH: SOUTH AFRICA


FATHER: DIBAKWANE
IDENTITY NUMBER : 8403165519081

SURNAME: DIBAKWANE
FORENAMES: TUMELO BRAIN

DATE OF BIRTH: 1984-03-16
PLACE OF BIRTH: BUSHBUCKRIDGE
COUNTRY OF BIRTH: SOUTH AFRICA

ENDORSEMENTS:
NONE

DEPARTMENT OF HOME AFFAIRS
PRIVATE BAG X2032
HAZYVIEW 1242
2022-04-22
HAZYVIEW DATE STAMP
(09)


DIRECTOR-GENERAL: HOME AFFAIRS

DATE PRINTED: 20220422

ISSUED BY: YEV262

