



LANTERN SCHOOL LANTERNSKOOOL

SCHOOL OF EXCELLENCE
SKOOL VAN UITNEMENDHEID

Dear Parents / Guardian

We refer to the Annual General Meeting held on **Monday 27 October 2025**, during which the **Budget for 2026** was approved and accepted.

Thank you to our parents who have paid all 2025 accounts in full. Your support and co-operation is much appreciated.

SCHOOL FEES ARE PAYABLE MONTHLY IN ADVANCE

Thus: 10 instalments, commencing 1 January 2026

SCHOOL FEES FOR 2026
R13 450-00

A DEPOSIT OF R1 345-00 PER CHILD (This includes book fees)
PAYABLE BETWEEN 1 NOVEMBER – 31 DECEMBER 2025

We draw your attention to the following:

1. 10 % Discount per family if paid in full before **16 January 2026**.
2. 7½ % Discount per family if paid in full before **31 January 2026**.
3. 5 % Discount per family if paid in full before **28 February 2026**.
4. **Debit and credit card facilities** are available at the school's Finance office.

1st Child = R13 450 p.a. = R1 345 per month

2nd Child = R12 105 p.a. = R1 210.50 per month

3rd Child = R12 105 p.a. = R1 210.50 per month

TO SUMMARISE: 1 Child = R1 345 per month

2 Children = R2 555.50 per month and

3 Children = R3 766 per month

Tel: 011 760 1096/7

Email / E-pos: lanternschool@lanternschool.co.za • finance@lanternschool.co.za
Web: www.lanternschool.co.za • Facebook: lanternluxnova

PLEASE TAKE INTO ACCOUNT THE FOLLOWING ARRANGEMENTS WITH REGARDS TO PAYMENT:

- Previous accounts from 2025 and earlier must be **paid in full** for learners to qualify for textbooks.
- School fees are payable monthly **in advance** and must be paid by the 7th of each month.
- Direct payments can be made at the bank and a copy of the deposit slip emailed to rina.lagrange@lanternschool.co.za.
- **BANK DETAILS: ABSA ROODEPOORT – ACC NO: 330 141 603
BRANCH NO: 630 141. Please use your account number or learner name and surname as reference.**

Application forms for **subsidy** are available from the **Finance office**. **Application for 2026 closes at the end of the second term** and must be submitted to Mrs Rina La Grange.

- *Proof of income and other documentation must be attached to the subsidy form.*
- **SCHOOL FEES ARE PAYABLE CONTINUOUSLY DURING THE YEAR. UNFORTUNATELY, ARRANGEMENTS TO SETTLE THE ACCOUNT WITH AN ANNUAL BONUS AT THE END OF THE YEAR, IS NOT POSSIBLE.**

ARRANGEMENTS REGARDING BUS TRANSPORT:

A separate fuel levy statement will be issued. Transport to and from school is not a right, but an additional service rendered by **Lantern School**. In the event of a fuel increase in 2026, the fuel levy will be adjusted accordingly to cover running costs.

Levies are due monthly, **in advance**. A ticket will be issued for each learner at the beginning of the month **if the account has been paid in full for that month – no ticket no transport**. Payment can also be made for a year **in advance**.

In case a bus ticket is lost/stolen, learners can purchase a **replacement ticket** from the Finance office for **R30**.

The levy will be determined according to the distance the learner lives from the school.

Tariffs per month are as follows:

(According to distance from school):

Route A – R850 p/m.

Route B – R995 p/m.

Route C – R1067 p/m.

Unfortunately, if a learner doesn't make use of transport during the month, **no discount** can be given. Should a learner no longer make use of school transport, Mrs la Grange should be notified immediately.

NB: IN THE EVENT OF THE FUEL LEVY NOT BEING PAID PROMPTLY NO TICKET WILL BE ISSUED AND THE LEARNER WILL NOT BE ALLOWED ON THE BUS.

Thank you to those parents who have paid their account in full.

Please complete, sign and return the tear-off slip to the school.

Any further inquiries can be made by contacting **Mrs Rina La Grange** at **(011) 760-1096/7.**

Yours faithfully



A. KOTZE
PRINCIPAL

I/We _____ parents/guardian of _____

in Grade _____ acknowledge receipt of the **Governing Body Circular** concerning **school fees for 2026.**

I accept the responsibility for paying the account monthly in advance.

SIGNATURE OF PARENT / GUARDIAN

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ID NUMBER

.....

CONTACT TEL. NUMBER.:

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