

# ADMISSION FORM: FREEDOM THERAPY

Intake Managed by: \_\_\_\_\_

How did you hear about HR? \_\_\_\_\_

|  |
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| <b>ADMISSION FORM: FREEDOM THERAPY CC</b><br><b>REGISTRATION NUMBER: 2010/063704/23</b><br><b>T/A HOUSE REGENERATION</b> |
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**STUDENT INFORMATION:**

**DATE:** \_\_\_\_\_

|                           |  |                             |  |
|---------------------------|--|-----------------------------|--|
| <b>Name:</b>              |  | <b>Physical Address:</b>    |  |
| <b>Surname:</b>           |  |                             |  |
| <b>ID Number:</b>         |  | <b>Postal Address:</b>      |  |
| <b>Home Language:</b>     |  |                             |  |
| <b>SPONSORS DETAILS:</b>  |  | <b>NEXT OF KIN DETAILS:</b> |  |
| <b>Surname:</b>           |  | <b>Surname:</b>             |  |
| <b>Name:</b>              |  | <b>Name:</b>                |  |
| <b>Cell Phone Number:</b> |  | <b>Cell Phone Number:</b>   |  |
| <b>Landline Number:</b>   |  | <b>Landline Number:</b>     |  |
| <b>E-Mail Address:</b>    |  | <b>E-Mail Address:</b>      |  |
| <b>Fax Number:</b>        |  | <b>Fax Number:</b>          |  |

**SUBSTANCES USED:**

|   |                                       |                                       |
|---|---------------------------------------|---------------------------------------|
| Alcohol <input type="checkbox"/>          | Crystal Meth <input type="checkbox"/> | Speed <input type="checkbox"/>        |
| Heroin <input type="checkbox"/>           | Buttons <input type="checkbox"/>      | Tik <input type="checkbox"/>          |
| Crack <input type="checkbox"/>            | Dagga <input type="checkbox"/>        | Khat <input type="checkbox"/>         |
| Cocaine <input type="checkbox"/>          | Ecstasy <input type="checkbox"/>      | Prescription <input type="checkbox"/> |
| Methamphetamines <input type="checkbox"/> | LSD <input type="checkbox"/>          | Other <input type="checkbox"/>        |

**PREVIOUS REHABILITATION:**

| Institution | Year/Months | Completed  | References/Contacts |
|-------------|-------------|--|---------------------|
|             |             | Yes <input type="checkbox"/> No <input type="checkbox"/> |                     |
|             |             | Yes <input type="checkbox"/> No <input type="checkbox"/> |                     |
|             |             | Yes <input type="checkbox"/> No <input type="checkbox"/> |                     |

**MEDICAL HISTORY:**

| Diagnosis   | Medication | Have you ever been tested for the following:                       | Results? |
|---|------------|--|----------|
| Psychiatric   |            | AIDS Yes <input type="checkbox"/> No <input type="checkbox"/>      |          |
| Physical  |            | TB Yes <input type="checkbox"/> No <input type="checkbox"/>        |          |
| Any Serious   |            | Syphilis Yes <input type="checkbox"/> No <input type="checkbox"/>  |          |
| Operations  |            | Hepatitis Yes <input type="checkbox"/> No <input type="checkbox"/> |          |
| Illnesses   |            |  |          |
| Allergies / Asthma                                  |            |  |          |
| Other Important                                     |            |  |          |
| <b>Medical Aid? (If so, please provide details:</b> |            | Yes <input type="checkbox"/> No <input type="checkbox"/>           |          |
| <b>Name of Medical Aid</b>                          |            | <b>Main Member's ID</b>  |          |
| <b>Main Members Name</b>                            |            | <b>Dependent Code</b>  |          |
| <b>Option</b>                                       |            | <b>Medical Aid Number</b>  |          |

**Terms and Conditions:**

The student, parents/guardians and sponsor hereby acknowledge that all information provided in this application is true, correct and honest. The student acknowledges that he/she has read the rules and understands that there will be daily routines and binds himself/herself thereto. The student, parents/guardian and sponsor acknowledge that they have read the conditions, rules and information provided to them and understands that there will be tests done at any time for drugs and/or alcohol and also agrees to be tested for AIDS, TB, Syphilis and Hepatitis if needed at his/her cost. The student, parents/guardian and sponsor understand that should the student leave the program before his/her completion date without our consent, House Regeneration is not obliged to assist the student in any other way. The student, parents/guardian and sponsor understand that should the above applicant abscond, be expelled or leave for any reason whatsoever, before completion of the time period decided on, or without consent from management they will forfeit all funds paid to House Regeneration and are still liable for any outstanding invoices not paid in full. Invoices should be paid within 7 days, thereafter there is a once off admin fee of R50 and 5% interest per month added. The student and sponsor herewith release themselves from any claim of any nature against House Regeneration or Extreme Freedom Foundation which themselves, administrators, dependents or executors may have as a result of civil unrest, arrests, deportation, accidents, sickness, injuries during recreation or work, loss of or damage to property or personal loss of any kind that may occur during or from involvement with House Regeneration. Any company property that is damaged due to the student's negligence will be billed to their account.

The student and sponsor allow all media recordings that may be taken by House Regeneration of anyone at House Regeneration or its functions to be used as House Regeneration sees fit.

Welcome to our Regeneration program, we look forward to your stay with us and trust that the outcome will lead to a life changing, permanent transformation for you and your loved ones.

\_\_\_\_\_  
**STUDENT SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**SPONSOR SIGNATURE**

\_\_\_\_\_  
**DATE**

|   |
|---|
| Please check that the following has been covered:<br><input checked="" type="checkbox"/> Watched the Intro DVD<br><input checked="" type="checkbox"/> Signed and Understand Disciplinary Form<br><input checked="" type="checkbox"/> Received Elize Banks' Book<br><input checked="" type="checkbox"/> Understand Payment Plans and have paid 1 <sup>st</sup> month's fee |
|---|



## HOUSE REGENERATION

### COVERING LETTER/PROGRAMME INFORMATION

Dear Reader

Thank you for taking a look at our program and showing a genuine care for breaking the bondage of addiction in your/your loved one's life. The purpose of this document is not to give you detail about our program material or curriculum but rather clarify the practical and logistical environment around the student's recovery.

House Regeneration has formed its roots with more than 30 years' experience in the field of biblical addiction therapy. With this hands-on experience, we have learnt that addictions and disorders in an individual's life are the cause of a long-standing belief of a tainted truth. We have also learnt that getting to the root of these lie-based beliefs takes time. Not only time but time together with intensive counselling, teaching, love and discipline that brings us to the point of personal victory for our students. As such, we have crafted a tri-partied agreement between the sponsor, student and ourselves. In this agreement, we expect the student and sponsor to commit to a year's therapy. The student agrees to be indebted to the sponsor for the fees paid to House Regeneration and the sponsor agrees to be indebted to House Regeneration for a 1-year program. A member of House Regeneration will happily go through these documents with you, should you be uncertain about any particular matter.

**NOTE:** *It is important that each page of this document is initialled by the sponsor(s), the student and ourselves. Failure to do so can cause us not to admit the student on to the program.*

To facilitate a smooth and speedier admission please make sure you bring the following with you when bringing the student for admission:

- A) A signed and initialled copy of the contract document;
- B) The required goods for the student as stipulated in the *List of required items*;
- C) Proof of payment for your first instalment. We do have internet facilities for EFT transfers but unfortunately DO NOT have card facilities. Cash is also accepted.

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FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO

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FOR STUDENT BEING DULY  
AUTHORISED THERETO

**AGREEMENT**  
**ENTERED INTO BETWEEN**  
**FREEDOM THERAPY CC**  
**REGISTRATION NUMBER: 2010/063704/ 23**  
**t/a HOUSE REGENERATION**

Address: Plot 358  
Sakabuka Avenue  
Derdepoort  
**PRETORIA**

E-Mail: [accounts@hr7.co.za](mailto:accounts@hr7.co.za)

Tel Number: 012 808 0527

**(Hereinafter referred to as “House Regeneration”)**

and

Full Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Identity Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

E-Mail: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Tel Number: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

**(Hereinafter referred to as the “Student”)**

and

Full Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Identity Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

E-Mail: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Tel Number: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

**(Hereinafter referred to as the “Parent(s)/Guardian(s)”)**

and

\_\_\_\_\_  
**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

\_\_\_\_\_  
**FOR STUDENT BEING DULY  
AUTHORISED THERETO**

Full Name: \_\_\_\_\_  
Surname: \_\_\_\_\_  
Identity Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Tel Number: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
\_\_\_\_\_

**(Hereinafter referred to as the “Sponsor”)**

WHEREAS the parties have entered into an agreement, in terms of which House Regeneration will provide professional services based on faith-based therapy;

WHEREAS the student(s), parent(s)/guardian(s) and sponsor have received and viewed the full information in regards to the conditions and requirements of House Regeneration;

AND WHEREAS the student, parent(s)/guardian(s) and sponsor have agreed to adhere to the conditions as set out in the document attached to this agreement, which contains the admission and information package provided to the parties;

AND WHEREAS the parties agree that this Agreement forms an undivided Agreement with the admission and information document attached hereto:

NOW THEREFORE THE PARTIES AGREE AS FOLLOWS:

**1. GENERAL**

1.1. The parties therefore agree to the conditions and provisions set out in the documents attached hereto marked as:

- (i) House Regeneration Admission form, ANNEXURE A.
- (ii) Acknowledgement of Debt, ANNEXURE B
- (iii) Disciplinary code, conduct and house rules, ANNEXURE C
- (iv) List of required items, ANNEXURE D
- (v) Rules with regard to doctor and dentist visits; ANNEXURE E

1.2. The parties agree that they have read the documents and acknowledge that the full meaning and consequences of the agreement have been explained to them and/or that they are deemed to have read and understood the full content and consequences of the agreement and agree to the contents thereof.

1.3. The parties agree that should the Student for whatever reason abscond, alternatively fail to complete the program, for whatever reason, the parties will forfeit any fees already paid with regards to the total program. In regards to the full payment of fees or partial payment of fees in increments for the total program, the parties agree to sign an acknowledgement of debt, which will form part of the agreement and are attached hereto as an annexure, marked "B".

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**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

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**FOR STUDENT BEING DULY  
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- 1.4. If any of the parties do not adhere to the rules, conditions and disciplinary code, the House Regeneration staff has the authority to stop any further treatment, or in severe cases alternatively access to the property.
- 1.5. The period the Student is attending House Regeneration for treatment, whether present or vacated without necessary permission is referred to as "total period".
- 1.6. The student/sponsor/parent shall all be responsible for all the necessary information, correspondence and payment of the total amount due and payable for the total period.

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**2. USE OF THE PREMISES BY THE STUDENT**

The Student shall use the premises solely for purposes of therapy and hereby specifically undertakes not to:

- 2.1. Contravene any law, bylaw, ordinance or regulation applicable in respect of the premises and in particular the rules as part of the Agreement; or
- 2.2. Cause or permit any nuisance upon the premises and for people staying on the premises (if applicable); or
- 2.3. Keep or store any dangerous or hazardous material or substance on the premises or do or permit anything, which may vitiate House Regeneration's Insurance on the premises or cause and increase in the premiums payable thereunder.

**3. COST AND VACATING OF PREMISES**

- 3.1. The Student will be receiving treatment at House Regeneration for a total period as indicated below:

**From:** \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

**Until:** \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

- 3.1.1. The Responsible person(s) herewith acknowledge that he/she is liable for the full amount due and payable for the total period specified herein whether the Student were present or not. This clause can be taken under review with management and the merits of each case will be treated as it happens and as management seems fit and fair under the given circumstances.

\_\_\_\_\_ X

- 3.1.2. The amount payable monthly (if paid on time) will reduce the capital amount as per the Acknowledgement of Debt signed by the Responsible Person. House Regeneration will supply, on reasonable demand, the total amount outstanding within 2 (two) days after it was requested by the Responsible Person.

- 3.1.3. In the event of breach of contract due to non-payment or for whatever other reason, an 'Invoice' from a duly authorised person of House Regeneration will be sufficient proof of the outstanding amount due and payable for the total period. In a scenario like this, the full amount will become due and payable.

\_\_\_\_\_ X

- 3.1.4. On the final payment of the outstanding amount due and payable the Responsible person/s will be given a letter confirming that the total agreed amount is paid in full and shall neither party have any claims, recourse or queries after that.

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**FOR HOUSE REGENERATION BEING  
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- 3.2. The Student may not without House Regeneration's prior written permission, which shall not be unreasonably withheld after treatment;
- 3.2.1. vacate the premises prior to the expiry of the Agreement; or
- 3.2.2. allow any external factors to influence the Treatment; or
- 3.2.3. vacate the premises for a necessity according to own beliefs and do not return.
- 3.3. Under no circumstances whatsoever and for no reason whatsoever shall the Responsible person/s take the student off the program out of own beliefs or disagreements with any procedure and/or therapy.
- 3.3.1. Should a Responsible person/s decide to take the Student off the program as presented by House Regeneration, the Responsible person/s will stay liable for the full outstanding amount as contained herein whether the Student is present at the facility or not. The Responsible person, should he/she decide to take a Student off the program, do so out of his/her own beliefs and/or conviction and contrary to the believes and conviction of House Regeneration.

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**4. ACKNOWLEDGMENT BY RESPONSIBLE PERSON**

The responsible person herewith acknowledges that:

- 4.1. He/she has inspected the premises and that they are suitable for the purposes for which it is to be used;
- 4.2. He/she will have no claim for damages whatsoever against House Regeneration for any reason whatsoever should the premises do not become suitable for the purpose for which it is used. All goods brought onto the premises by the Student shall be at the sole risk of the Student without the House Regeneration incurring any responsibility relating thereto whatsoever;
- 4.3. House Regeneration shall not be liable for any loss sustained by the Student by reason of any burglary or fire on the premises or for any damage suffered by the Student as the result of any act of nature or omission on the part of the House Regeneration and/or his/her agent or personnel or as a result of any defect in the premises;
- 4.4. The 'Capital Sum' will be payable, without demand or notice, in advance on or before the first day of the month, for the month, for the total period of the Student at House Regeneration.

**The Treatment shall commence on the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ ;**

**And shall expire at midnight on the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_  
(Expiry Date).**

- 4.5. Should the Capital Sum as aforesaid, or any other sum(s) payable by the Responsible person/s hereunder not be paid promptly on due date; or
- 4.6. Should the Responsible person/s in any other respect whatsoever contravene or permit contravention of any one or more of the provisions and conditions of this agreement or fail in observance of any one or more of the same, the House Regeneration, notwithstanding any waiver to the contrary on his part of any of his rights under this agreement, shall have the right to immediately and without any notice whatsoever cancel this agreement and to take whatsoever actions it may deem to be necessary, without prejudice furthermore to the House Regeneration rights to any claims for expenses and or damages including legal charges if whatsoever nature.

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**FOR HOUSE REGENERATION BEING  
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**FOR STUDENT BEING DULY  
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**5. COSTS**

All legal costs, as between attorney and own client, including but not limited to collection commission at tariff rate as well as administration and other costs incurred by House Regeneration in respect of any legal and other steps taken by House Regeneration against the Student and or Responsible person/s to enforce any of the obligations in terms of this Agreement, will be for the account of the Responsible Person(s).

\_\_\_\_\_ X

**6. DOMICILIUM**

- 6.1. Each party choose *domicilium citandi et executandi* at his address as set out in 1 above, at which address all notices and legal process in relation to this agreement or any action arising there from may be effectually delivered and served.
- 6.2. Any notice given by one of the parties to the other ("the addressee") which:
  - 6.2.1. Are delivered by hand to the addressee's *domicilium citandi et executandi* shall be presumed, until the contrary is proved, to have been received by the addressee on date of delivery; or
  - 6.2.2. Is posted by prepaid registered post from an address within the Republic of South Africa to the addressee at the addressee's *domicilium citandi et executandi* shall be presumed until the contrary is proved to have been received by the addressee on the fifth day of the date of posting.
- 6.3. Either party shall be entitled, on written notice to the other, to change the address of his *domicilium citandi et executandi*.

**7. JURISDICTION**

The parties agree to the jurisdiction of the Magistrate's Court in the district in which jurisdiction area the parties may fall in connection with any action or suit arising from this agreement or the cancellation hereof.

**8. WHOLE AGREEMENT**

- 8.1. This agreement constitutes the sole and entire agreement between the parties and no warranties, representations, guarantees or other terms and conditions of whatsoever nature not contained herein shall be of any fore or effect.
- 8.2. No variation of the terms and conditions of this agreement or any consensual cancellation thereof shall be of any force or effect unless reduced to writing and signed by the parties or their duly authorised agents.
- 8.3. Should two or more persons sign this agreement as Student, Debtors or Responsible person, the said persons shall be liable in *solidium* for the due performance of their obligation in terms of this agreement.
- 8.4. The agreement shall be duly concluded upon signature thereof by all parties hereto.

SIGNED AT PRETORIA NORTH on this \_\_\_\_\_ day of \_\_\_\_\_

**STUDENT:**

\_\_\_\_\_

**AS WITNESSES**

1. \_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_  
**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

\_\_\_\_\_  
**FOR STUDENT BEING DULY  
AUTHORISED THERETO**

SIGNED AT PRETORIA NORTH on this \_\_\_\_\_ day of \_\_\_\_\_

**SPONSOR:**

\_\_\_\_\_

AS WITNESSES

1. \_\_\_\_\_ 2. \_\_\_\_\_

SIGNED AT PRETORIA NORTH on this \_\_\_\_\_ day of \_\_\_\_\_

**PARENT:**

\_\_\_\_\_

AS WITNESSES

1. \_\_\_\_\_ 2. \_\_\_\_\_

SIGNED AT PRETORIA NORTH on this \_\_\_\_\_ day of \_\_\_\_\_

**FREEDOM THERAPY t/a HOUSE REGENERATION:**

\_\_\_\_\_

AS WITNESSES

1. \_\_\_\_\_ 2. \_\_\_\_\_

\_\_\_\_\_  
**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

\_\_\_\_\_  
**FOR STUDENT BEING DULY  
AUTHORISED THERETO**



# ACKNOWLEDGEMENT OF DEBT

We, the undersigned,

i.

\_\_\_\_\_ (Name and Surname)

\_\_\_\_\_ (Identity Number)

ii.

\_\_\_\_\_ (Name and Surname)

\_\_\_\_\_ (Identity Number)

iii.

\_\_\_\_\_ (Name and Surname)

\_\_\_\_\_ (Identity Number)

**(Hereinafter referred to as "the DEBTOR")**

Do hereby acknowledge that we are to be truly and lawfully indebted to

**FREEDOM THERAPY CC t/a HOUSE REGENERATION  
REGISTRATION NUMBER: 2010/063704/23**

**(Hereinafter referred to as "the CREDITOR")**

- 1.1. The sum of           R80 000.00           arising from the agreement entered into and between the Creditor and the Debtor on the \_\_\_\_\_ (hereinafter referred to "the Capital Sum).
- 1.2. Interest on the Capital Sum at the rate of prime (currently 15.5%) per annum compounded monthly Calculated from \_\_\_\_\_ to date of payment, both days inclusive plus all additional legal fees.
- 1.3. All attorney and own client costs incurred and/or to be incurred by attorneys for and on behalf of the Creditor in collecting the aforementioned sums and/or interest and/or costs and which shall include 10% collection commission and tracing agent's fees.
- 1.4. The capital amount, interest and costs referred to in paragraphs 1.1 to 1.3 are hereinafter referred to as "the Debt".
2. We hereby undertake to liquidate the Debt in terms of this Acknowledgement of Debt by way of the following payment arrangement
  - 2.1. The amount of R \_\_\_\_\_ on or before the \_\_\_\_\_
  - 2.2. Thereafter the amount of R \_\_\_\_\_ on each and every succeeding month until the debt has been repaid

\_\_\_\_\_  
**FOR HOUSE REGENERATION BEING  
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\_\_\_\_\_  
**FOR STUDENT BEING DULY  
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- 2.3. Payments are to be made direct into the following account:
- Account Name:** Extreme Freedom  
**Account Number:** ABSA 4052005339  
**Branch Code:** 632005  
**Reference:** Students Full Name and Surname
- 2.4. We undertake to deliver proof of payment within 24 hours after such payment, by way of e-mail to e-mail address: [accounts@hr7.co.za](mailto:accounts@hr7.co.za)
3. We acknowledge that all payments shall first be credited to interest and costs before being credited to capital.
4. We agree that in the event of any of the following occurring:
- 4.1. We fail to make payment of any amount by due date;
- 4.2. We are sequestrated or if we take steps to surrender my estate;
- 4.3. We make, or attempt to make, a compromise with any of our creditors;
- 4.4. Any of our property is attached in execution of a court judgement; then the full balance outstanding as at the date of our default shall immediately and automatically become due and payable and no notice of such default shall be necessary.
5. We further agree that should we default as aforesaid, proceedings may at the Creditor's option be instituted for:
- 5.1. Recovery of the full balance then outstanding in terms of this Acknowledgement of Debt; or
- 5.2. On the basis of the original cause of action pertaining hereto
6. We renounce the benefit of legal exceptions no value received and revision of accounts. In addition, if the NCA does not apply to the Credit Agreement referred to in paragraph 1.1 hereby also renounce the benefits of error of calculations, *non-cause debiti* (no cause of debt), and *non numeratae pecuniae* (money not paid). We confirm that we understand the terms referred to in this clause and the effect of my renunciation.

#### 7. PROOF OF INDEBTEDNESS

A Certificate signed by the Creditor setting forth:

- 7.1. the amount of our indebtedness to the creditor at any time ("the debt");
- 7.2. that the debt is then due and payable;
- 7.3. the interest payable on the debt and the date from which such interest is reckoned, shall constitute sufficient proof of the facts therein stated and shall be binding on me for all purposes, including, without derogating from the generality of the foregoing, the granting of provisional sentence, summary judgement or any other remedy, provided that if the afore going provisions are unenforceable for any reason, such certificate shall constitute *prima facie* proof of the debts.

#### 8. CESSION OF RIGHTS

The creditor may at any time cede, assign and transfer the whole or any part of his claim against me hereunder to any third party together with the benefit of and real security held by the creditor in respect of his claim.

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**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

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**FOR STUDENT BEING DULY  
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9. We agree that no relaxation on the part of the Creditor of any of the above conditions shall in any way alter our obligations or operate as a waiver or abandonment of the Creditor's rights in terms of this Acknowledgement of Debt
10. We agree that this document may be submitted by the Creditor to the relevant Court having jurisdiction as a Consent to Judgement, including an Order for payment of instalments, interest and costs between Attorney and Own Client (subject to paragraph 1), if such further proceedings are deemed necessary by the Creditor in consequence of any default in making payment of the said instalment.
11. No variation of this Acknowledgement of Debt will be of any force or effect unless it is in writing and signed by or on behalf of the Creditor and us
12. DOMICILIUM CITANDI ET EXECUTANDI

We hereby choose as my *domicilium citandi et executandi* for all purposes under this agreement, whether in respect of court process, notices or other documents or communications of whatsoever nature (including the exercise of any option), the following address

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THUS DONE AND SIGNED AT \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_

**(i) DEBTOR:**

\_\_\_\_\_

AS WITNESSES:

1. \_\_\_\_\_ 2. \_\_\_\_\_

THUS DONE AND SIGNED AT \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_

**(ii) DEBTOR:**

\_\_\_\_\_

AS WITNESSES:

1. \_\_\_\_\_ 2. \_\_\_\_\_

\_\_\_\_\_  
**FOR HOUSE REGENERATION BEING  
 DULY AUTHORISED THERETO**

\_\_\_\_\_  
**FOR STUDENT BEING DULY  
 AUTHORISED THERETO**

STUDENT NAME: \_\_\_\_\_

**ACKNOWLEDGEMENT OF RULES, CONSEQUENCES AND DISCIPLINARY STRUCTURE**

Dear Parent/Sponsor,

The following document is a breakdown of the rules and regulations that the student will have to comply with on the program in order to progress, and show a commitment towards their recovery.

It is a requirement of House Regeneration that the following form be thoroughly read and signed off by both the Parent/Sponsor and the student. If you have any questions about the structure of the program please do not hesitate to ask.

**Requirements for Students to Leave TLC (Tender Love and Care):**

Please make sure that upon enrolling the student you have been shown and explained the conditions around our TLC facility. All students will spend a minimum of 6 weeks in TLC, unless otherwise decided by the programme directors. Before a student leaves TLC they must fulfil the following requirements:

1. No Smoking (This includes):
  - *Not been seen smoking*
  - *Not smelling of smoke on breath or fingers*
  - *No handling of cigarettes at all*
2. Follow all TLC rules: - A person must have no offences written against their names for at least 2 weeks.
3. Life story must be written according to specification and it must be handed in and signed off by a leader/counsellor.
4. The student must be off all psychiatric medication, unless the programme directors sign them off as fit to move out of TLC.

**Consequences**

Our disciplinary system is made up out of (a) warnings and (b) offenses

**(a) Warnings:**

Warnings are given in writing when a rule is broken

**(b) Offenses:**

Offenses are given on every 3<sup>rd</sup> warning

1. Being sent back to TLC:
2. *If a student is in the 2<sup>nd</sup> phase (top house) and received 2 offenses and 3 Warnings (total of 9 written warnings) they will be sent back to TLC for a minimum of 2 weeks.*
3. Kicked off program (At Directors Discretion):
  - a) being in solitary 3 times and having 2 warnings
  - b) being in TLC for 3 months without signs of improvement

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**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

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**FOR STUDENT BEING DULY  
AUTHORISED THERETO**

## **NB! Complaints / Handling of Requests**

The student has access to request forms from any prefect on the program. Should the student have a complaint or request it must be admitted for management's review on a written request form. The student gets a duplicate copy of his/her complaint/request signed by a prefect upon a student's request. For a complaint/request to be deemed valid a signed request form must be produced from the student. This will mean that the complaint or request has been brought to management's attention. If a prefect refuses to sign a student's request form the student should notify a member of staff immediately.

### **Take note:**

These rules and regulations are set up for the benefit of the students on the program. The rules and regulations serve a dual purpose of maintaining and teaching a basic level of discipline as well as giving us a basic format with which to measure an individual's commitment and attitude toward both the program, and the individuals' recovery.

There will be no refund of any monies paid if a student runs away or leaves the program prematurely due to ill-discipline!

### **Rules and regulations:**

1. No drugs or alcohol on the premises, including psychiatric or any other medication unless in management care
2. No breaking of property or vandalism
3. No bodily harm to any other person or animal; or reckless behaviour that endangers others
4. No sex on the premises
5. No leaving TLC without prior arrangement
6. No stealing
7. No cell phones, Laptops, DVD players, radios, MP3 players or other electronic equipment will be allowed
8. No valuables that might get stolen
9. No spray can products, deodorants or hair spray
10. No low-cut tops or hipsters. Skirts and dresses for girls 2 fingers above knee
11. No books, DVD's, music, magazines or cash money allowed
12. No sleeping during the day
13. No emails or sms sent without a request and only in emergency cases
14. Gym area must be kept tidy
15. Time schedule must be strictly followed. No being late!
16. Keep personal area inspection tidy at all times
17. No fans, heaters, toasters, or any other electrical equipment unless it has been approved
18. No candles allowed
19. No fires in TLC outside designated areas
20. No swearing, cursing, blaspheming or drug talk allowed
21. Visitation in Visitor's Room. 1 hour after church only
22. No family members allowed past courtyard door

23. *No visitations or phone calls for the 1<sup>st</sup> (six) 6 weeks* \_\_\_\_\_ (SIGNATURE)
24. No pictures, photos or anything else allowed to be displayed. Keep in locker
25. All procedures and processes must be correctly followed to be deemed valid
26. No overriding chain of command
27. No back chatting or challenging prefects, leaders, management or lecturers
28. No communicating with opposite sex either verbally or physically
29. No lying
30. Hairstyles must be neat and orderly, no hair colour or patterns

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**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

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**FOR STUDENT BEING DULY  
AUTHORISED THERETO**



## HOUSE REGENERATION

### Requirements for Written Authority and Mandate for Debit Payment Instructions (Only to be completed when paying by Debit Order)

#### A. AUTHORITY GIVEN BY

Name of Account Holder \_\_\_\_\_

Address \_\_\_\_\_

Bank \_\_\_\_\_

Branch and Branch Code \_\_\_\_\_

Account Number \_\_\_\_\_

Type of Account \_\_\_\_\_

Amount \_\_\_\_\_

Date \_\_\_\_\_

#### TO Freedom Therapy t/a House Regeneration

**Abbreviated Name as Registered with the Bank: House Reg**

**Beneficiary's Address: Plot 358 Sakabuka Avenue, Derdepoort**

This signed Authority and Mandate refers to our Contract dated \_\_\_\_\_  
("the Agreement")

I/We hereby authorise you to issue and deliver payment instructions to your Banker for collection against my/our above-mentioned account at my/our above-mentioned Bank (or any other Bank or Branch to which I/we may transfer my/our account) on condition that the sum of such payment instructions will never exceed my/our obligations as agreed to in the Agreement and commencing on \_\_\_\_\_. And continuing until this Authority and Mandate is terminated by me/us by giving you notice in writing of not less than 20 ordinary working days, and send by prepaid registered post or delivered to your address as indicated above.

The individual payment instructions so authorised to be issued must be issued and delivered as follows: monthly, bi-monthly, three monthly, six monthly, annually, weekly, bi-weekly (*delete that which is not applicable*)

In the event that the payment day falls on a Sunday, or recognised South African public holiday, the payment day will automatically be the very next ordinary business day.

\_\_\_\_\_  
**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

\_\_\_\_\_  
**FOR STUDENT BEING DULY  
AUTHORISED THERETO**

Payment instructions due in December may be debited against my account on \_\_\_\_\_

I/We understand that the withdrawals hereby authorised will be processed through a computerised system provided by the South African Banks. I also understand that the details of each withdrawal will be printed on my Bank statement. Such must contain a number, which must be included in the said payment instruction and if provided to me should enable me to identify the Agreement. This number must be added to this form in Section E before the issuing of any payment instruction.

**B. MANDATE**

I/We acknowledge that all payment instructions issued by you shall be treated by my/our above-mentioned Bank as if the instructions have been issued by me/us personally.

**C. CANCELLATION**

I/We agree that although this Authority and Mandate may be cancelled by me/us, such cancellation will not cancel the Agreement. I/We shall not be entitled to any refund of amounts which you have withdrawn while this Authority was in force. If such amounts were legally owing to you.

**D. ASSIGNMENT**

I/We acknowledge that this Authority may be ceded or assigned to a third party if the Agreement is also ceded or assigned to that third party, but in the absence of such assignment of the Agreement, this authority and Mandate cannot be assigned to any third party.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ of \_\_\_\_\_

\_\_\_\_\_  
(Signature as used for Operating on the Account)

\_\_\_\_\_  
(Assisted By)

\_\_\_\_\_  
**FOR HOUSE REGENERATION BEING  
DULY AUTHORISED THERETO**

\_\_\_\_\_  
**FOR STUDENT BEING DULY  
AUTHORISED THERETO**



## **Bedding and Cutlery:**

- Bedding (pillow, sheet(s), blanket(s) and or duvet)
- Towels (shower and swimming)
- Hot-water bottle
- Cutlery, coffee mug white plate, white porridge bowl

***When our students book in they are allowed an initial and once-off chance to bring in coffee, tea, sugar, milk powder, 6 toilet rolls, washing powder, stay soft, bleach, Tabard and any other personal toiletries. Thereafter all necessities must be bought from the Jabez Tuck Shop.***

## **NOTE:**

***NO groceries/toiletries may enter the premises from outside during your stay.***

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- A Steel trunk for safekeeping of personal items, with own lock and key:  
Size: 28 x 700mm/600mm
- Bible: Life application or Amplified (if possible)
- Journal (note book) for daily use (Quiet time)
- Exam pad (with punched holes for easy filing, alphabet dividers) file with ring holes, and basic stationary (pens, pencil, highlighters, ruler, eraser)
- Clipboard (for the boys)
- Torch
- Hobbies are encouraged; any musical instruments, paints & paint brushes and canvas, wood carving, puzzles, games etc.
- Girls bring knitting needles, crochet needle and 4 rolls of wool (Any colour or thickness)
- 3 meters material of your choice, matching sheen and needle to sew with

## **Standard Medication**

***This excludes any prescription medication - If you are bringing in prescription medication be sure to include a copy of the original prescription.***

*Empty ice-cream container or Tupperware holder, with name and surname on the lid written with a permanent marker, containing:*

- 2x Multi Panel Drug Test's
- Elastoplast and a little cotton-wool
- Valoid or medicine (for nausea)
- Flue medication, ACC200
- Citro Soda
- Panado's and Neurofen for girls' menstruation pain

## **Clothing:**

*Outings: 2 sets of clothing for outings (Any colour, winter and summer clothing)*

### Daily uniform:

- 3-4 Black Shorts (Bermudas)/skirts
- 3-4 Black short-sleeve/sleeveless T-shirts
- 2 pairs black jeans | Long trousers
- Black school jersey with v neck
- 1 Black wind-breaker with hood
- 3 Pair black socks
- 1 Pair black Crocs (Imitation is fine)
- 1 Pair trainers/running shoes
- 1 Pair sandals
- Girls: Sun-hat with broad rim
- Boys: Hat/Cap
- Bathing suit
- Tracksuit (black)
- Gym clothes or tracksuit
- Girls Only: Must have a beige or white dress or skirt and white top for Church.