Grade: [ ] **REGISTRATION 2022-2023** (Office use only Code: _____)

Name of Child (Surname)_____(Given names)_____

Address: _____City: _____ Postal Code:_____

Home Phone #:_____ Cel Phone: _____

Family e-mail: _____

Birth Date of child entering:: Month_____\ Day_____\Year _____ Male [ ] Female [ ]

Place of Birth: _____ Language spoken in the home:_____

Father's name: _____Bus. Ph: _____
Occupation:_____

Mother's name: _____Bus. Ph: _____Occupation: _____

Mother's Religion: _____Father's Religion: _____

Child's Religion: _____Place of Baptism: _____

Place of First Communion: _____Place of Confirmation: _____

Parish Attending: _____ _____Envelope # _____

Name & Address of previous school: _____ _____Ph. #: _____

Doctor: _____Ph.#: _____Dentist: _____Ph. #: _____

Emergency Contact (a): _____Relationship: _____Ph. #: _____

Emergency Contact (b): _____Relationship: _____Ph. #: _____

Medical Problems\Allergies:_____

B.C. Care Card Number: _____

Confirming signature: Parent\Legal Guardian's name: _____Signature: _____

Dated: _____

Please note that more information is needed than what is asked for on this form. For a full registration package please contact the school.

PLEASE PROVIDE THE FOLLOWING DOCUMENTS FOR YOUR CHILD:

[ ] Birth Certificate
[ ] Baptism Certificate
[ ] Immunization form
[ ] Previous School Report Card
[ ] Care Card
[ ] Proof of child's legal residency, if born outside of Canada
[ ] Proof of parent's legal residency and copy of utility bill.