

In Case of Emergency – Other than Parent/Guardian

Name: _____ Relationship to Student: _____ Phone: _____

Previous School Attended

Name of School: _____

Address of School: _____

Telephone: _____ Fax: _____

Aboriginal Ancestry

*** (The following information is voluntary) ***

Aboriginal people are those who identify themselves to be Registered/Treaty/Status Indian, Non-Status, Métis, or Inuit. Based on this definition, do you consider yourself to be an Aboriginal person?

Please circle: YES NO If YES, please specify the Aboriginal group you belong to:

Registered / Treaty / Status Indian Non-status Indian Métis Inuit

We understand that as a Catholic school Sacred Heart has the following expectations for all students:

✠ ***Each student must strive to create a Christian Community within the school.***

✠ ***Christian Ethics classes are compulsory.***

✠ ***All students must attend liturgical celebrations.***

Parent Signature: _____ Date: _____

We understand that this application is used to determine course offerings, staffing and class scheduling for the upcoming school year. We agree, therefore, with school policy that students are expected to continue in the courses selected for each year. Please notify Sacred Heart as soon as possible if a change in course selection is necessary or if you are transferring to another school.

Registration in individual classes will occur on a first come first serve basis. Requests for course changes or late registrations may not be accommodated after the student and teacher timetables have been completed. Students are therefore encouraged to complete their registration forms as soon as possible.