

REGISTRATION PACKAGE

- St. Mary's School Pamphlet
- School Registration Form
- Copy of Birth Certificate
 - Copy of Care Card
- Copy of Baptismal/ Confirmation Certificate
(if applicable)
- Legal Residency of Parent Form
 - \$100 Deposit Fee
(requested upon acceptance)
- Latest copy of Report Card (if applicable)

St. Mary's School

1088 Gillett Street, Prince George, B.C. V2M 2V3
Phone (250) 563-7502; Fax (250) 563-7818; e-mail: office@cispg.ca

REGISTRATION FORM

Registration Date _____ Date Entering School _____ Grade _____

Personal: Child's Legal Last Name _____

Given Names _____

First Name Used _____

Sex: M _____ F _____ Age _____ Birth date: year _____ month _____ day _____

A copy of the child's birth certificate must be provided.

Previous School Attended _____

Grade _____

Mailing Address _____

Citizenship: Child's Birth Country _____

If born in Canada, Child's Birth Province _____

Citizenship of Parents: Canadian: yes _____ no _____ If no, please specify _____

A proof of citizenship form must be filled out. If you are a landed immigrant, papers must be provided.

Family:

Father's Name _____

Mother's Name _____

Parent's Mailing Name _____

Parent's Mailing Address _____

Postal Code _____

Street Address (if different from mailing) _____

Home Phone Number _____

E-Mail _____

Father Resident in the Home? yes _____ no _____ Mother Resident in the Home? yes _____ no _____

Father's Employer _____

Work/Cell Phone _____

Mother's Employer _____

Work/Cell Phone _____

Emergency Contact:

Name _____

Phone _____

Relationship to Child _____

Day Care (if any) _____

Phone _____

Religion:

Religion of Parents:

Father _____

Mother _____

Catholic Parish Attended _____

Child's Sacramental history:

If your child has been baptized please provide a copy of the baptism certificate.

Baptism: Date _____ Parish _____

First Eucharist: Date _____ Parish _____

Confirmation: Date _____ Parish _____

Reconciliation: Date _____ Parish _____

Health:

Child's Medical Number _____

Doctor's Name _____

Phone _____

Any Physical Limitations? _____

Details of any Allergies _____

Medical Alert yes _____ no _____ Details _____

Signature of Parent/Guardian _____

Name of the person signing this form. Please print clearly.

St. Mary's School Registration Policy

Purpose: To regulate and monitor the registration of students in a manner which is in keeping with the philosophy of the Catholic Independent Schools of the Diocese of Prince George.

1. Preference in registration will be in the following order:
 - 1st. Local St. Mary's Parishioners.
 - 2nd. Catholic Children from surrounding parishes.
 - 3rd. Siblings
 - 4th. Non-Catholics.
2. There shall be a non-refundable tuition deposit of \$100.00 per family.
3. Tuition fees shall be as per fee structure determined for that year.
4. If a child is on the waiting list and a space becomes available, priority as shown in paragraph 1., above, shall be applied. The applicant will be phoned by the school principal.
5. Final approval on all registrations will depend on:
 - a) An interview with parents and students.
 - b) Information received from the child's former school.
6. The Religion Program:
Each student, Catholic and non-Catholic, must participate in all aspects of the school's religion program.
7. Family Life Program:
 - a) The intent of the program is to assist parents in promoting the integration of Christian principles into the whole pattern of human life. The program aims at helping the child to develop a moral, social, emotional, physical and intellectual capacity in a manner that promotes self-image and respect for the dignity of others.
8. Uniforms:
All students in grades 1 through 7 are expected to wear the school uniform.

I have read and understand the St. Mary's School Registration Policy.

Dated _____ Signed: _____
(Parent/Guardian)

I give consent for my child _____ to participate in in-town field trips during school hours.

Dated _____ Signed: _____
(Parent/Guardian)

I give consent for my child's photograph, name, and school work to be used in the public media. This includes the newspaper, television, radio, and the internet.

Child's Name _____ (please print)
Dated _____ Signed: _____
(Parent/Guardian)

Legal Residency of Parent - FORM A

(If parents are deceased, use Form B)

To be completed and signed by a parent or legal (court-appointed) guardian.
(If legal guardian attach copy of court order appointing you as legal guardian).

1. I am (please one):

- A Canadian citizen (if not born in Canada, please attach photocopy of citizenship paper/card)
- A landed immigrant (attach photocopy of landed immigrant status paper)
- Lawfully admitted to Canada under one of the following documents (please mark the appropriate box below and attach photocopy of document):
 - Admission as a refugee claimant
 - A person claiming refugee status who has a letter of no objection
 - Student authorization (student visa) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
 - Employment authorization (working permit) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
 - A person carrying out official duties as a diplomatic or consular official (with a foreign representative acceptance counter foil in his/her passport)
 - Other - Document description: _____

(Must be cleared with Immigration Canada)

2. I am a resident of British Columbia (please one):

Yes

Residency Address: _____

No, I am not a resident of British Columbia

3. Parent's/Legal Guardian's Name: _____

Parent's/Legal Guardian's Signature: _____

Date: _____

Legal Residency of Parents (Deceased) - FORM B

To be completed and signed by the student or a knowledgeable adult (one who knows the student's parent(s) and has knowledge of the facts respecting their decease and the matters set out in this document.

1. The student's deceased parent was at time of death:

A Canadian citizen

A landed immigrant

2. The student's deceased parent was at time of death a resident of British Columbia (please one):

Yes

Residency Address: _____

No, was not a resident of British Columbia

Signed by: _____

Student: _____

Knowledgeable Adult's Name: _____

Knowledgeable Adult's Signature: _____

(Knowledgeable Adult is one who knows the student's parent(s) and has knowledge of the facts respecting their decease and the matters set out in this document.)

Date: _____