

Date _____

2020/2021 Kindergarten Student Registration Form - Lethbridge Christian School

A COPY OF THE STUDENT'S BIRTH CERTIFICATE IS REQUIRED FOR REGISTRATION.

Student Information:

Student's Name: _____ Grade To Enter: _____

Younger Siblings Not Yet Attending School:

Brother's Names & Birthday: _____ Sister's Names & Birthday: _____

Spiritual Background:

Church presently attending _____ Pastor: _____

Other Information:

What is your home (closest) school? _____

Are you planning to or have you already registered at another school? _____

If yes, which one. _____

Has the student attended a preschool? Yes ____ No ____

If yes, which one _____

Would you like to receive your newsletters and memos by email? Yes ____ No ____

Bussing

Our family requires bussing Yes _____ No _____

Our student attends Kingdom Kids and will need bussing from there. Yes _____

****Bussing is available at specified pick up points** within the city and in Coaldale. Parents will be notified of the pick-up points and times when the 2020/2021 registration is complete. **Please be aware that we do not do front door pick up. Routing scheduling is subject to change.**

Date preference **if** two Kindergarten classes are running: ____ Mon/Wed ____ Tues/Thurs

KINDERGARTEN:

Preference:

Tues/Thur Full Days Mon/Wed Full Days

Student Number (if known): _____

School: _____

* Required Fields

*Legal Last Name: _____ *Legal First and Middle Names: _____

*Preferred Last Name (if different): _____ *Preferred First Name (if different): _____

*Birthdate (D/M/Y): _____ *Gender: Female Male Unknown Unspecified

*Home / Cell Phone Number: _____

*Birth Certificate: Yes No *Other Proof of Residency: Yes No

*Home Address: _____

*Mailing Address: _____

(House and Street) (City) (Province) (Postal Code)

Siblings currently enrolled with Lethbridge School Division: _____

**Medical information (i.e. medical conditions, allergies, etc): _____

**This must be completed every year

Name and location of previous school attended: _____

Date last attended previous school: _____ Last Grade Completed: _____

Priority 1 Contact Information (i.e. parent or guardian)

Priority 2 Contact Information (i.e. parent or guardian)

First & Last Name: _____

First & Last Name: _____

Address: _____

Address: _____

City, Postal Code: _____

City, Postal Code: _____

Relationship to Student: _____

Relationship to Student: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Cellular Phone: _____

Cellular Phone: _____

E-Mail Address: _____

E-Mail Address: _____

Student is living with (check ALL applicable boxes): Priority 1 Priority 2 Other

Emergency Contact Information (in the event the above contacts are unavailable)

First & Last Name: _____

Address, City, PC: _____

Relationship to Student: _____

Home Phone: _____

Work Phone: _____

Cellular Phone: _____

Please ensure this emergency contact is advised that their name has been used for this purpose.

Aboriginal Self Identification - If you wish to declare that the student is Aboriginal, please select one:

First Nation (status) First Nation (non-status) Metis Inuit

For further information, please refer to: www.education.alberta.ca/system-supports/results-reporting or contact Alberta Education at 780.427.8501.

If you have questions regarding the collection of student information by the school board, please call 403.380.5299.

First Nation of Residence: _____ Student's Indian Registry number (10 digit): _____ (IF APPLICABLE)

Citizenship: 1 - Canadian Citizen 2 - Permanent/Landed Immigrant 5 - Study Permit

English as a Second Language (ESL) Eligibility

A student may be eligible for ESL support when the primary language spoken at home is a language other than English. ESL students can be born in Canada or in another country.

Languages Spoken at home: _____

Student's first language spoken: _____ Do you need assistance with interpretation? Yes No

Pursuant to Section 23 of the Canadian Charter of Rights and Freedoms:

Citizens of Canada

- whose first language learned and still understood is French; or
- who have received their primary school instruction in Canada in French (this means instruction in a French only school, not a French Immersion program) have the right to have their children receive primary and secondary instruction in French; or
- of whom any child has received or is receiving primary or secondary instruction in French (this means instruction in a French only school, not a French Immersion program) in Canada, have the right to have all their children receive primary and secondary instruction in the same language.

According to this criteria, are you eligible to have your child educated in French? Yes No

If yes, do you wish to exercise your right to have your child educated in French? Yes No

**In Alberta, parents can only exercise this right by enrolling their child in a French first language (Francophone) program offered by a Francophone Regional authority.

I hereby certify that the foregoing information is true, correct and complete to the best of my knowledge and belief.

Signature: _____

Date: _____



Lethbridge School Division

20 / Student Registration Package

Student's Name: _____ School: _____ Grade: _____

INSTRUCTIONS

1. Read the Freedom of Information and Protection of Privacy Act information and Normal School Information notifications sheet enclosed in this package and retain this document at home for your reference.
2. Complete or verify the Student Registration Form.
3. Read and complete the enclosed Consent Forms.
4. Return the completed registration package to the school.

Consent to receive Commercial Electronic Messages (CEM's)

On July 1, 2014 Canada's Anti-Spam Legislation (CASL) came into effect. As of this date, Lethbridge School Division cannot send any messages by any means of telecommunication including e-mail messages, text messages, instant messages and direct messages to social networking accounts, where one or more of the purposes of this message is to encourage participation in commercial activity, whether or not there is an expectation of profit, unless we have received express consent to send these messages.

Lethbridge School Division values the many learning opportunities, activities and mementos that enhance the educational experience that we provide to our students. Some of these opportunities include performances, field trips, travel, school clothing, student photos, yearbooks, hot lunches or similar school related activities. In order for Lethbridge School Division, our schools and school councils to communicate our programs, activities and special offers through electronic means, we require your consent.

By signing this document, I/we consent to receiving a commercial electronic message (CEM) from Lethbridge School Division, its schools, and school councils. Examples of these would include, but would not be limited to:

- Newsletters
- Offers to purchase goods and services such as
 - Apparel
 - Yearbooks
 - School Photos
 - Travel offers
 - Hot lunches
- Advertisements for school activities, events and programs for which there is a fee

Note that consent to receive CEM information may be withdrawn at any time by contacting the School or Lethbridge School Division.

I, _____ the parent/guardian/Independent Student give my consent to receive Commercial Electronic Messages (CEM's) from Lethbridge School Division, its schools and school councils. This consent will remain in effect until I expressly withdraw my consent by notifying the School or Lethbridge School Division.

Signature of Parent/Guardian/Independent Student

Date

Email address: _____

(Please print clearly)

CONSENTS FOR INFORMATION DISCLOSURE

Copyright Release

As part of a student's educational program, they may be recorded and taped; have their work displayed; have their work reproduced for non-profit, educational purposes. Their production(s)/work(s) may be shown at educational displays during open house, in-service sessions and other school-related activities at school or School Board sites, or at school or School Board sponsored displays in the community or used in a school publication.

_____ I give my consent to the information disclosures as described above.

_____ I do not give my consent to the information disclosures as described above.

I understand that this consent is valid for this current school year only.

_____	_____	_____
Print Name	Signature of Parent/Guardian/ Independent Student	Date

Media/Internet Consent

Lethbridge School Division enjoys and encourages an open and positive relationship with print (i.e. newspapers, magazines, etc.) and broadcast media (i.e. television, radio, etc.) as a means of promoting and reporting on school activities. In addition, schools are using the Internet (websites, web-based programs) to increase positive learning, sharing and recognition opportunities for staff and students.

By signing this section I/we consent to the disclosure of information for use by Media and/or School Division use for learning and/or celebration of learning purposes. Examples of these would include, but would not be limited to:

- Interviews for media or school publications (i.e. - school newsletters, etc.)
- Photograph of the student and posting of student's name
- Group and class photographs that include student and their name
- Class work (i.e. - art, stories, projects) done by student
- Awards, scholarships, prizes received by student
- Participation of Student in Extracurricular Activity (Athletics, clubs, fundraising efforts, music)
- Collaboration with other schools and classrooms using web-based programs such as Skype, YouTube, Twitter, etc.

Please mark one of the following to indicate your consent:

_____ I give consent to disclosures as described above.

_____ I do not give consent to the above disclosures.

_____ I give consent, with the following exceptions.

_____	_____	_____
Print Name	Signature of Parent/Guardian/ Independent Student	Date

Public Health

Alberta Education will share student demographic information with Alberta Health Services in the case of health emergencies, such as a disease outbreak.