

**IF YOU REGISTERED ON-LINE: BRING THIS COMPLETED FORM TO THE FIRST NIGHT OF CLASS  
TO REGISTER ON-SITE: BRING THIS COMPLETED FORM WITH YOU TO REGISTER**

**PLEASE PRINT CLEARLY AND ALL FIELDS ARE MANDATORY:**

Student: M  F  \_\_\_\_\_  
First Name Last Name Date of Birth (day/month/year)

Address: \_\_\_\_\_  
Number Street Apt/Unit No City Postal Code

Phone: \_\_\_\_\_  
Home Cell E-mail address

Day School: \_\_\_\_\_ Current Grade: \_\_\_\_\_ OEN: \_\_\_\_\_

Country of birth: \_\_\_\_\_ Status in Canada (Citizen, Perm. Res., Visitor, etc.): \_\_\_\_\_

**Non-citizens:** entry into Canada date: \_\_\_\_\_ Document expiry date: \_\_\_\_\_

Enrolled in High School: Full-time (3 or more classes)  **OR** Part-Time (1 or 2 classes)

**September 17, 2019 – January 14, 2020 (On-site registration September 12, 2019 6:00-8:00 at Cathedral or Brebeuf)**

Choose preferred school: Cathedral  St. Jean de Brebeuf

Course Code: \_\_\_\_\_  New Course **OR**  Repeat Course - Previous mark: \_\_\_\_\_

**OR**

**CREDIT LANGUAGES:**

September 23, 2019 – June 1, 2020 (On-site registration Sept. 16, 2019 6:00-8:00 at St. Charles East 5<sup>th</sup> Street)

Course Code: \_\_\_\_\_

As a parent/guardian of the above noted student, I approve for my son/daughter to attend Night School.

\_\_\_\_\_  
Parent/Guardian Signature (only if under 18 years old) Date

\_\_\_\_\_  
Student Signature Date

A student attending day school may enroll in a Night School credit course with written permission from principal/designate.

**PERMISSION GRANTED BY DAY SCHOOL**

Does this student have an IEP? No Yes (please provide copy)

\_\_\_\_\_  
Principal / Designate Name (**Please Print**)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date