



**N. Okanagan-Shuswap  
School District No.83**

**SCHOOL** \_\_\_\_\_

Registration Date (MM/DD/YY) \_\_\_\_\_

Enrolment Start Date (MM/DD/YY) \_\_\_\_\_

OFFICE USE ONLY	
Entering Grade _____	French Immersion: Early <input type="checkbox"/> Late <input type="checkbox"/>
DIVISION _____	
PEN _____	Student# _____
Catchment School _____	X-Boundary Form <input type="checkbox"/>
Proof of BC Residency <input type="checkbox"/>	Grad Program: 1950__ 2004__
Legal Restrictions For Access To Student? <input type="checkbox"/>	
(If yes, copy of legal document must be on file at school)	

**STUDENT INFORMATION:**

Legal Family Name \_\_\_\_\_ Legal First Name \_\_\_\_\_ Legal Middle Name(s) \_\_\_\_\_

Usual Family Name (if different from legal name) \_\_\_\_\_ Usual First Name \_\_\_\_\_ **STUDENT CELL NO.** \_\_\_\_\_

**BIRTHDATE** \_\_\_\_\_ **GENDER**  Female  Male **PRIMARY LANGUAGE SPOKEN IN HOME**  English  French  Other

MM DD YY **Birth Certificate # or Govt ID #** \_\_\_\_\_

**BIRTH PLACE** \_\_\_\_\_  Canadian Citizen  Permanent Resident  
 (If from out of Canada – paperwork filed AND to Supt. Office)  Exchange Student  Student VISA  Refugee

Last School \_\_\_\_\_ Date of Leaving \_\_\_\_\_

City/Prov/Country \_\_\_\_\_ Grade \_\_\_\_\_

**HOME PHONE:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **Unlisted? (Y/N)**  **Mailing Address** \_\_\_\_\_

**HOMEADDRESS:** \_\_\_\_\_  
 Apt. # \_\_\_\_\_ House # \_\_\_\_\_ Street Name \_\_\_\_\_  
 City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

**INDIGENOUS SELF-IDENTIFIED INFORMATION:**

Status Indian  Non-Status Indian  Metis  Inuit **Indigenous Ancestry:**  Yes  No

**BAND NAME** \_\_\_\_\_ **Band No.** \_\_\_\_\_ **Status No.** \_\_\_\_\_

**PARENT(S)/GUARDIAN(S) WITH WHOM CHILD RESIDES:**

**Name** \_\_\_\_\_  
 Family Name \_\_\_\_\_ First Name \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

**Name** \_\_\_\_\_  
 Family Name \_\_\_\_\_ First Name \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

**PARENT(S)/GUARDIAN with Whom Child DOES NOT Reside:**

**Name** \_\_\_\_\_  
 Family Name \_\_\_\_\_ First Name \_\_\_\_\_ Relationship to Student \_\_\_\_\_

**Home Address** \_\_\_\_\_  
 Apt. # \_\_\_\_\_ House # \_\_\_\_\_ Street Name \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Email \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Court Order**  
**Custodial Arrangements:** \_\_\_\_\_

**IN CASE OF EMERGENCY & PARENTS CANNOT BE REACHED, THE SCHOOL SHOULD CALL:**

\_\_\_\_\_  
 \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
**Name** \_\_\_\_\_ **Relationship to Student** \_\_\_\_\_ **Daytime Phone** \_\_\_\_\_

**STOREFRONT SCHOOL ONLY: (Courses to enter in CIMS)**

1. \_\_\_\_\_ 2. \_\_\_\_\_

**MEDICAL ALERT:**  YES  NO **Doctor:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Care Card No:** \_\_\_\_\_ **Serious Health Concerns:** \_\_\_\_\_

**SPECIAL LEARNING NEEDS:** Are there any special learning needs or other services of which school personnel should be made aware, which would relate to the programming needs for your child? *(Please forward any relevant documentation to the school.)*

YES  NO If yes, please describe: \_\_\_\_\_

**OTHER CHILDREN**

**IN FAMILY:**

1. _____	_____	_____	2. _____	_____	_____
Name	Gender	Age	Name	Gender	Age
3. _____	_____	_____	4. _____	_____	_____
Name	Gender	Age	Name	Gender	Age

**OTHER INFORMATION:** \_\_\_\_\_  
(ie. Continuing Custody Order)

DATE

PARENT/GUARDIAN SIGNATURE

Information on this form is collected under the authority of the *School Act* and will be used for educational program purposes and when required may be provided to health services, social services or other support services as outlined in the *School Act*. The information collected is protected under the *Freedom of Information and Protection of Privacy Act*.

**EMAIL COMMUNICATION - *Electronic Messages***

Canada's new anti-spam legislation requires us to obtain your consent in order to provide you with 'commercial electronic' information about many of the happenings and events occurring at your child's school or within our school district. As a result, the Board of Education of School District No. 83 (N. Okanagan-Shuswap) would like to ensure that we have your consent to send you newsletters, announcements and other electronic messages that may contain advertising or promotions relevant to our students and families. Examples of such messages include information about fieldtrips, fundraising, yearbooks, student pictures, dance tickets, hot lunches, graduation, or similar events and offers.

If you wish to receive the above communications from us, please indicate your consent below. Each parent/guardian must complete and sign below.

**Parent #1: Name:** \_\_\_\_\_  
*Family Name First Name Relationship to Student Email*

I DO consent to receive 'commercial electronic messages' from the N. Okanagan-Shuswap School District.

I DO NOT consent to receive 'commercial electronic messages' from the N. Okanagan-Shuswap School District.

**Signature** \_\_\_\_\_

**Guardian #2: Name:** \_\_\_\_\_  
*Family Name First Name Relationship to Student Email*

I DO consent to receive 'commercial electronic messages' from the N. Okanagan-Shuswap School District.

I DO NOT consent to receive 'commercial electronic messages' from the N. Okanagan-Shuswap School District.

**Signature** \_\_\_\_\_

**Guardian #3: Name:** \_\_\_\_\_  
*Family Name First Name Relationship to Student Email*

I DO consent to receive 'commercial electronic messages' from the N. Okanagan-Shuswap School District.

I DO NOT consent to receive 'commercial electronic messages' from the N. Okanagan-Shuswap School District.

**Signature** \_\_\_\_\_

*You may withdraw your consent at any time by informing your school in writing (either via email or printed note) that you choose to no longer receive email communication from the school, school district or staff relating to messages that may contain advertising or promotions.*