

OUR LADY OF PERPETUAL HELP SCHOOL

235 Poplar Street, Kamloops, BC V2B 4B9 Telephone (250) 376-2343 Fax (250) 376-2361 Website: www.olphschool.ca

Registering for Grade: _____

PERSONAL INFORMATION					
Student's Legal Names:	NAME	FIRST		MIDD! C	
				MIDDLE	
Student Usual First and Last Name Us					_
Birthdate: Month Day				Female:	
Birth Province or Birth Country:					
A Copy of the Birth Certificate and Bap		<u>oe on file with the</u>	school.		
The Tuition Category our Family Qua	lifies For:				
@Registered & Supporting Catholic: Form must be signed by your Parish I			rting Catholic Rate y	our Parish Tuition Sub	sidy
Parish:					
@Non-Registered Catholic Rate	@Non Catholic R	ate			
PLEASE INDICATE SACRAMENTS APP Baptism Reconciliation First Communion Confirmation	PLICANT HAS RECEIV	Status Non-St Metis	GINAL ANCESTRY: atus		
FAMILY INFORMATION					
Mailing Address:			Email Addre	ess:	
City:	Postal Code:		Home Phone:		
Mother's Cell No.:		Father	's Cell No.:		
House Address & Phone Number (if di	fferent):				
Applicant lives with: Both Parents	Mother □	Father	Guardian 🛭		
Mother's/Guardian's Name:			Res	ident in Home: Yes 🗆	No 🛭
Employer:	Occupation	:		Work No.:	
ather's/Guardian's Name:			Res	sident in Home: Yes □	No
Employer:	Occupation	:		Work No.:	
Emergency Contact:					
Daycare/Babysitter:					
Names and Birthdates of Brothers and					
LEGAL INFORMATION					

I am (please X one): A Canadian citizen (if not born in Canada, please attach photocopy of citizenship paper	c/card)
A landed immigrant (attach photocopy of landed immigrant status paper)	
Lawfully admitted to Canada under one of the following documents (please mark the apphotocopy of document) Admission as a refugee claimant A person claiming refugee status who has a letter of no objection Student authorization (student visa) for one year or longer. Employment authorization (working permit) for one year or longer.	propriate box and attach
A person carrying out official duties as a diplomatic or consular official (with acceptance counter foil in his/her passport) Other – document description: (must be cleared with Immigration Canada)	n a foreign representative
(Residency in British Columbia) I am a resident of British Columbia: (please X one):YES Residency address:	
NO I am not a resident of British Columbia.	
MEDICAL INFORMATION	
Care Card Number: Medical Ale	ert: YES NO
Medical Condition: Medic/Alert Bracelet: Whe	re Worn:
Is this child currently on any medications: YES NO If Yes Description:	
Note: If your child has prescribed medication, EPI Pen, etc. that will need to be administered durin required form at the office prior to the start of the school year.	g school hours please pick up
Physical Disabilities/Limitations: Allergies:	
Doctor's Name: Phone No.:	
EDUCATIONAL INFORMATION	
Former School: Address:	
City: Province: Postal Code:	
Has this child received Special Education Programming YES NO Has this child received Learning Assistance: YES NO	
I give permission for the transfer of all information and Documentation pertaining to my child as nat	med above if transferring from a
Public School or School Out side BCParent/Guardian Signature	Date
To be completed by the Parent/Guardian: Why do I want my child to come to Our Lady of Perpetual Help School:	
PARENTAL COMMITMENT	
We have read the information package describing Our Lady of Perpetual Help School and we desire the Catholic Perpetual Help School.	education offered by Our Lady of
We understand that the grade/classroom placement of our children will be made by the principal in consultation parents/guardians.	with the teachers and
In matters of discipline, our child will be subject to the disciplinary action of the school staff and principal. We re to suspend or expel any student who does not respect its spiritual standards or cooperate in the educational pro-	
We have read the tuition payment policy and understand our financial commitment. We will notify the school primeet the commitment.	ncipal and the pastor if we cannot
We understand that we are applying for membership in the community of Our Lady of Perpetual Help School. We school and support the efforts of the school staff in providing our children with a Catholic education.	e agree with the policies of the
Parent/Guardian Signature Date	