



Kindergarten School Registration Form

Lighthouse Christian Academy

2015-2016

| Office Use Only | |
|-----------------|-----------------|
| Reg. Date _____ | Student # _____ |
| PD Date _____ | PEN # _____ |

PERSONAL AND FAMILY INFORMATION: (Please Print Clearly)

Student's Usual Name: _____
 Student's Legal Name: _____
 Gender: Male Female
 Address: _____
 Church Attending: _____

Birthdate: _____
 Birthplace: _____ Home Language: _____
 Aboriginal Ancestry: Yes No
 Living With: Mother Father Both

Parent (Father/Caregiver): _____ Parent (Mother/Caregiver): _____
 Home Phone: _____ Cell Phone: _____
 Employer: _____ Work Phone: _____
 Email Address: _____
 Emergency Contact 1: _____ Phone: _____ Cell Phone: _____
 Emergency Contact 2: _____ Phone: _____ Cell Phone: _____
 Out of Province Contact: _____ Phone: _____ Cell Phone: _____

LEGAL INFORMATION: (Please Print Clearly)

Is there a court order in effect or pending? Yes No Copy on File? Yes No
 If YES give details concerning custody, guardianship and access: _____
***NOTE: Copy of an up-to-date court order must be on file with the school.**
 Is there anyone to whom your child should NEVER be released? _____

EDUCATIONAL INFORMATION: (Please Print Clearly)

Has the student been involved in any of the following programs? (Check any that apply):
 Learning Assistance Special Education Speech/Language Counseling ESL French Immersion
 If so, give a description: _____
 Does the student have any academic or discipline problems? _____
 Has the student experienced any social problems? _____

Doctor's Name: _____ Phone: _____ Care Card #: _____
 Allergies/Health Conditions: _____
 Life-Threatening? Yes No
 Is the student on any medication? Yes No Description: _____

INFORMATION TO ATTACH TO APPLICATION FORM: (Check if attached)

\$100 non-refundable registration fee, which will be applied to tuition student VISA/work VISA (if applicable)
 2 current photographs immunization paperwork Birth Certificate

PERMISSIONS:

I give my consent for the release of my name, parent info, address, phone #'s and emails for the LCA Family Directory.
 I give my consent for the publication of my child's photograph & name in the school yearbook or newsletter.
 I give my consent for the publication of my child's photograph in the LCA newsletter, website, Facebook and PR publications.
 I give my consent for my child to participate in local, curriculum-based trips, either on the LCA bus/van, other parent's cars or walking.
 Parent Signature(s) _____ Date _____
 I have read and support the mission, policies and rules of LCA as described in the Student/Parent Handbook.
 I agree to abide by the school rules and guide my child to uphold the Discipline Policy of the school as outlined in the Handbook.
 Parent Signature(s) _____ Date _____