## Registration Form - EICS Summer School -John Paul II Satellite School

| CALM 20 | Physical Education 10 |
| :---: | :---: |
| Religion 15 - Grade 10 | Physical Education 20 |
| Religion 25 - Grade 11 | Physical Education 30 |
| Religion 35 - Grade 12 |  |
| All Religion and CALM Courses are \$40 | All Physical Education Courses are \$60 |

## Student Information

Legal First name: $\qquad$ Legal Middle Name: $\qquad$
Legal Last Name: $\qquad$
Student Also Known As:

Given Names: $\qquad$ Surname: $\qquad$

Address: $\qquad$
City: $\qquad$ Postal Code: $\qquad$
Home Phone \#: $\qquad$ Parent/Guardian Cell \#: $\qquad$

Parent/Guardian E-mail: $\qquad$ Gender: M/F

Birthdate: _ YYYY/MM/DD $\qquad$ Alberta Student \#: $\qquad$

Are you a current Elk Island Catholic School Student? $\qquad$
Last School Attended: $\qquad$ Grade entering in fall 2016: $\qquad$

Information Disclosure: We ask for this information in order to register you in the class that you have selected. Elk Island Catholic School's employees, Board of trustees, and agents (eg. Legal counsel) may have access to this registration information on a need-to-know basis. If you have any questions about the collection of this information you may contact the Principal of Continuing Education Tanya Thiessen at tanyath@eics.ab.ca or Michele Pejkovic at 780-467-2121 ext: 1001

## Affirmation and Consent

I have read the information Disclosure contained in this Registration Form and understand how the information I have provided will be used. The information given in this Registration Form is complete and correct.

| Signature of Parent/Guardian/Independent Student |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
| Office Use Only: Payment method: | Visa | MasterCard | Debit | Cheque/\# | Amount Paid _____ |

