



# ST. IGNATIUS SCHOOL

## New Student Registration Form

**FOR OFFICE USE ONLY:**

Application Date: \_\_\_\_\_  
 Interview Date: \_\_\_\_\_  
 Interview Time: \_\_\_\_\_  
 Acceptance Date: \_\_\_\_\_  
 Parish Envelope #: \_\_\_\_\_

**PLEASE PRINT**

Full Legal Name \_\_\_\_\_ Gender \_\_\_\_\_  
 Applying for Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_ MET No. \_\_\_\_\_  
Day Month Year  
 Student Address \_\_\_\_\_  
Street City/Town Postal Code  
 Currently residing in Public School Division \_\_\_\_\_  
 Religion \_\_\_\_\_ Place of Worship \_\_\_\_\_ Pastor / Clergyman \_\_\_\_\_  
 Sacraments Received: (MONTH / YEAR) \_\_\_\_\_ Baptism \_\_\_\_\_ First Communion \_\_\_\_\_  
 \_\_\_\_\_ Reconciliation \_\_\_\_\_ Confirmation \_\_\_\_\_  
 Current School (if applicable) \_\_\_\_\_ Address \_\_\_\_\_ Grade \_\_\_\_\_

<input type="checkbox"/> (✓) FATHER	<input type="checkbox"/> (✓) LEGAL GUARDIAN
_____	_____
<small>Surname</small>	<small>Given Name</small>
Address _____	
City/Town _____	
Postal Code _____	Cell # _____
Home Ph. # _____	Work # _____
e-mail _____	
Occupation _____	
Employer's Name _____	
Business Address _____	
Father's / Guardian's Religion _____	

<input type="checkbox"/> (✓) MOTHER	<input type="checkbox"/> (✓) LEGAL GUARDIAN
_____	_____
<small>Surname</small>	<small>Given Name</small>
Address _____	
City/Town _____	
Postal Code _____	Cell # _____
Home Ph. # _____	Work # _____
e-mail _____	
Occupation _____	
Employer's Name _____	
Business Address _____	
Mother's / Guardian's Religion _____	

**Emergency Contact 1** (If unable to contact the parents):

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
 Home Phone No. \_\_\_\_\_ Work Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

**Emergency Contact 2** (If unable to contact the parents):

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
 Home Phone No. \_\_\_\_\_ Work Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

(OVER)

**Student lives with:** \_\_\_ Both Parents    \_\_\_ Mother Only    \_\_\_ Father Only    \_\_\_ Guardian    \_\_\_ Other  
**Custody:**    \_\_\_ Both Parents    \_\_\_ Mother Only    \_\_\_ Father Only    \_\_\_ Guardian    \_\_\_ Other  
**School reports / general mailings / notices should be sent to:** \_\_\_ Parents / Guardians    \_\_\_ Mother    \_\_\_ Father

**School age siblings:** \_\_\_\_\_ (NAME / GRADE / SCHOOL)  
 \_\_\_\_\_ (NAME / GRADE / SCHOOL)  
 \_\_\_\_\_ (NAME / GRADE / SCHOOL)

**Aboriginal Identity:** *(Completion optional for Manitoba Education, Training & Youth)*

If Aboriginal, you may select up to 3 identities.

\_\_\_ Not Aboriginal    \_\_\_ Aboriginal - Uncertain of Ancestry  
 \_\_\_ Anishinaabe    \_\_\_ Ininiw (Cree)    \_\_\_ Dene (Sayisi)    \_\_\_ Dakota  
 \_\_\_ Oji-Cree    \_\_\_ Michif    \_\_\_ Michif-Cree    \_\_\_ Michif-French  
 \_\_\_ Michif-Ojibway    \_\_\_ Inuktituq    \_\_\_ Aboriginal - Other

**Skills or services your family could offer to St. Ignatius School:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Medical Information:**

Manitoba Health Registration # (6digit) \_\_\_\_\_ Personal Health ID # (9digit) \_\_\_\_\_

Physician's Name \_\_\_\_\_ Doctor's Office Phone No. \_\_\_\_\_

Additional Health Coverage (Blue Cross, etc.) \_\_\_\_\_

Please indicate any Health Care needs:

- !  My child is NOT experiencing any health problems at this time.
- Asthma     Anaphylaxis     Seizure Disorder     Allergies (identify) \_\_\_\_\_  
 Disabilities \_\_\_\_\_  
 Medication \_\_\_\_\_  
 Other \_\_\_\_\_

With this application I / we accept the following:

- The Policies, Rules and Regulations as stipulated in the St. Ignatius School Handbook (see website).
- The right of Administration to discipline or dismiss a student whose conduct warrants such action.

\_\_\_\_\_  
Signature of Parent(s)/Guardian(s)

\_\_\_\_\_  
Date

**PLEASE PROVIDE THE FOLLOWING WITH THIS APPLICATION:**

- Your child's most recent progress report (except kindergarten)
- Proof of age for nursery and kindergarten (copy of birth certificate)
- Copy of Baptismal certificate
- Registration Fee - \$25.00/family