



# NEW WESTMINSTER SCHOOLS StrongStart Early Learning Centre

Student Registration Form for 2020-21 school year  
Richard McBride  QMS  Connaught Heights

Registration Date (mm/dd/yyyy): \_\_\_\_\_ PEN: \_\_\_\_\_

Has your child attended a StrongStart program in previous years? Y  N

Child's Legal Last name \_\_\_\_\_ Legal First name: \_\_\_\_\_ Middle: \_\_\_\_\_  F  M

Birthdate (mm/dd/yyyy): \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Home Phone Number(s): \_\_\_\_\_

Residence: Parents:  Same  Separate Student:  Both Parents  Mother  Father  Other: \_\_\_\_\_

Parent/Guardian #1 Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Home Phone Number(s): \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Parent/Guardian #2 Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Home Phone Number(s): \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

Siblings attending the centre: \_\_\_\_\_

Caregivers attending with child: \_\_\_\_\_

Caregivers Emergency contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone Number(s): \_\_\_\_\_ Cell phone number: \_\_\_\_\_

Family's Home Language: \_\_\_\_\_ Translator required Y  N

Are you new to Canada: yes no If yes, when did you arrive (mm/dd/yyyy)? \_\_\_\_\_ Home Country \_\_\_\_\_

Does your child have any known allergies: Y  N  Please specify: \_\_\_\_\_

Child's CareCard Number \_\_\_\_\_

Other concerns or issues you want us to be aware of: \_\_\_\_\_

**Office Use Only : Funding Category**(documentation required from the custodial parent or legal guardian) (office to photocopy originals)  
**Primary Document:**  
 Canadian Birth Certificate naming parent(s)  
 Or Birth Certificate with certified translation in English, if needed AND applicable Immigration, Citizenship, or Permanent Residence Documentation  
Or, **ONE** of the following documents may be used to register a student on an interim basis until the Birth Certificate is produced:  
 Canadian Citizenship Card  First Nations Documentation/Band Card  
 Confirmation of Permanent Residence AND Passport  Refugee Claimant Documentation from Immigration Canada  
 Permanent Resident Card (front and back)  Parental Work, Study Permit, or Visitor Permit (indicating the student is accompanying the parent – may need verification letter from the Newcomer Office)

I certify that all statements on this application are true and complete and that no information has been withheld. I also acknowledge that it is my responsibility to ensure that I notify the school regarding any changes to the above information.

The information on this form is collected under the authority of the School Act 13 and 79. The information provided will be used for educational program and administrative purposes, and when required, may be provide to health services, social services, or support services at outlined in Section 79 (2) of the School Act. The information collected on this form will be consistent with the Freedom of International and Protection of Privacy Act. If you have any questions about the information recorded on this form, please contact your School Administrator.

Signature of Parent/Guardian: \_\_\_\_\_ Date(mm/dd/yyyy): \_\_\_\_\_

**MEDIA, PHOTO, AND VIDEO RELEASE  
FOR THE 2020-2021 SCHOOL YEAR  
StrongStart and Early Learning Parent/Guardian Permission**

It is New Westminster School District's tradition to allow staff and the media to photograph and film individual students and groups of students to commemorate, document, and promote learning and various educational sports and cultural events taking place in the schools and the district. While images and videos add to the community life of our schools, they are not required for educational purposes. Students' first names, photographs, video excerpts and comments may be published in the school yearbook, newsletter, or digital media and on occasion, in school district publications, annual report, or in the news media.

I give consent for the publication of my child's name, photograph, video excerpts and comments for purposes consistent with the above. This consent will be considered valid from the date at which it is signed until the end of the current school year, June 30.

Name of Child: \_\_\_\_\_

Date (mm/dd/yyyy): \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

I **DO NOT** give consent for the publication of my child's name, photograph, video excerpts and comments for purposes consistent with the above.

Name of Child: \_\_\_\_\_

Date (mm/dd/yyyy): \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_