STUDENT REGISTRATION FORM

The information requested on this form is being collected pursuant to the School Act, Section 18, A.R. 213/88 & A.R. 175/93 and the FOIP Act, Sections 32(c) & 37(b) & 38 (c) Information acquired is kept secure and access is restricted
Parents are responsible to ensure the accuracy of this information and to report changes.

Name of School: Trinity Christian Academy **School Year:** 2021/2022

STUDENT INFORMATION

Alberta Student Number:				
Legal Surname:	Legal Given Name(s):	Legal Middle Name:		
Preferred Surname:	Preferred Given Name(s):			
Birth Date: Year / Month / Day	Phone (h):	Cell:	Gender:	
	E-Mail Address:		Grade:	
Last School Attended: (Name of School and City)	Are you registered at: Online ☐ Outreach ☐ Home School ☐ If registered at another school, please give name _____			

Has this student received or required additional supports for learning? Yes ☐ No ☐ If yes, please check all that apply:
Speech Language Therapy ☐ Learning Support ☐ Social/Emotional Behavioral Support ☐
Individual Program Plan and/or Individual Support Plan ☐ Other: _____

Rural Students - Legal Land Description: ¼ Sec ☐☐ Sec ☐☐ Twnshp ☐☐ Range ☐☐ 911 Address (blue sign) _____

Urban Students –House Address (including street name, house # and apt. if applicable): _____

Has your child attended a Golden Hills School previously Yes ☐ No ☐ School Name: _____

Transportation Services:	**Language**	**Citizenship:**	**Independent Student:**	**International Student:** Yes ☐ No ☐
I am requesting transportation services: http://www.ghsd75.ca/Transportation Yes ☐ No ☐	Primary Spoken:	Canadian ☐ Landed Immigrant ☐ Other (please specify) ☐	Yes ☐ No ☐	Student Visa Expiry Date: ___/___/___ Month Day Year

PARENT/GUARDIAN INFORMATION

Parent/Guardian #1 Name:		Relationship to Student:	
Address:		City:	Postal Code:
Primary #	Alternate #	Work #	E-Mail Address:
Parent/Guardian #2 Name:		Relationship to Student:	
Address:		City:	Postal Code:
Primary #	Alternate #	Work #	E-Mail Address:
Student's Mailing Address if Different from Above Parent/Guardian:			
Address:		City:	Postal Code:
Primary #	Alternate #	Work #	E-Mail Address:

EMERGENCY INFORMATION (Contacts other than parents used in emergencies only)

1. Contact:		Relationship to Student:	
Address:		City:	Postal Code:
Primary #	Alternate #	E-Mail Address:	
List Any Life Threatening Medical Conditions:			

Student Lives With:

Parent/Guardian #1 ☐ Parent/Guardian #2 ☐ Both ☐ Other ☐ please specify if other: _____

(Please check all that apply)

Custody:

In rare instances, a child may be designated as "Protected" if a court has issued an order under the Child Youth and Family Enhancement Act, the Divorce Act or the Youth Criminal Justice Act or is the subject of a parenting time restriction. As per the Education Act, where a person claims to be a parent or guardian or claims the existence of any limitation on the authority of a parent or guardian, the onus is on that person to provide proof of the claim.

Does such an order exist? Yes ☐ No ☐

If "yes", please discuss this situation with the school administration. Legal documentation will be required.

If other family circumstances are important for the school to know, please advise the principal.
Questions in this part of the registration form are designed to assist in our effort to maintain good school-home communications. If you have difficulty responding to any of these; please speak to your school principal.

Pursuant to Section 23 of the *Canadian Charter of Rights and Freedoms*, citizens of Canada,

- whose first language learned and still understood is French; or
- who have received their primary school instruction in Canada in French have the right to have their children receive primary and secondary instruction in French; or
- of whom any child has received or is receiving primary or secondary school instruction in French in Canada, have the right to have all their children receive primary and secondary school instruction in the same language.

In Alberta, parents can only exercise this right by enrolling their child in a French first language (Francophone) program offered by a Francophone Regional Authority.

A. According to the criteria above are you eligible to have your child receive a Francophone education?
☐ Yes ☐ No

B. If yes, do you wish to exercise your right to have your child receive a Francophone education?
☐ Yes ☐ No

If Student/s resides on a reserve, please provide the following:
Band Number _____ *and* Treaty Number _____

If you wish to declare the student is Aboriginal, please select one:

☐ First Nations (status) ☐ First Nations (non-status) ☐ Metis ☐ Inuit

For further information, please refer to: https://education.alberta.ca/system-supports/results-reporting/ or contact Alberta Education at 780-427-8501.

If you have questions regarding the collection of student information by the school board, please contact your school.

Legal Document used to verify registration: (Select One) PLEASE PROVIDE A COPY with registration

Birth Certificate ☐ Permanent Resident/Landed Immigrant Documents ☐ Passport ☐ Official Stats Canada Documents ☐

Work or Study Permit ☐ Canadian Citizenship Document ☐ Adoption Papers ☐ Temporary Resident Papers ☐

OFFICE USE ONLY: Declared Residency: _____

I hereby certify the foregoing information given is correct, and complete; to the best of my knowledge and belief.

Parent (Guardian) Signature _____ **Date of Signature** _____

Golden Hills School Division

Freedom of Information and Protection of Privacy (FOIP) Act

Golden Hills School Division is collecting personal information about you and your child with this Student Registration Form. This personal information is necessary to provide an educational program for your child and ensure a safe school environment for all students and staff.

Some of the ways the school or division may use personal information are listed below. The Information and Privacy Commissioner's office states that the division does not require written consent from you to:

- Share information with Alberta Education.
- Use a student's name, related contact information, and telephone numbers to check on a student who is absent.
- Take and use individual, class, team, club, or school videos/photos within the school community for internal school purposes as part of the delivery of educational programs or services **(not for external uses such as websites or brochures).**
- Use a student's name on artwork or material to be displayed at the school or other division sites.
- Use a student's name on lists such as an honour roll, scholarship, or other awards within the school or division.
- Use a student's name and academic information when the school wishes to apply for provincial and federal awards or scholarships on behalf of the student.

This is not a complete list, but it gives some examples of how the personal information may be used. Your child may attend or participate in school activities that are open to the general public. Some examples of these activities are sporting competitions, concerts, cultural programs, clubs, field trips, graduation, or other ceremonies. Photos and videos may be taken by members of the public including journalists and media reporters. The division cannot control or prevent the further distribution or use of these photos, videos, images, or other personal information.

Written consent is required to use a student's personal information for any purpose other than educational programming or the safety of students and staff. Written consent can be revoked at any time by notifying the school principal in writing. Please refer to the attached *FOIP Public Communication & Media Consent Form*.

In accordance with the Freedom of Information and Protection of Privacy (FOIP) Act, Golden Hills School Division is authorized and required under the provisions of the School Act and its regulations to collect and use the personal information to provide an educational program and ensure a safe and secure school environment for students.
Under Section 39(1) of the FOIP Act, the school division may use personal information only (a) for the purpose for which the information was collected or compiled or for a use consistent with that purpose; (b) if the individual the information is about has identified the information and consented, in the prescribed manner, to the use; or (c) for a purpose for which the information may be disclosed to that public body under section 40, 42, or 43. Another use of personal information requires written consent. If no written consent is obtained, the personal information cannot be used or disclosed.
Please note that the signature on the student registration form does not indicate consent for the use of this information. If you have questions or concerns regarding the collection or intended uses of this information, please contact the school principal.
Your name, home phone number, home address and postal code are collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act (that information relates directly to and is necessary for an operating program or activity of a public body).* This information will be used to provide an educational program and ensure a safe and secure school environment for students.

If you have any questions about the collection, contact the FOIP Coordinator, 435A Highway No. 1, Strathmore, Alberta T1P 1J4 or 403-934-5121 ext. 2024.

FOIP Consent Form

It has become common practice for our students to be working to gather information, connect to other learners on projects and share their work or activities. Your child's name and image could appear on the school or school division's website, YouTube, or social media site. and your consent is required. C**onsent can be revoked at any time by notifying the school principal in writing**. The following are examples where written consent is required:

- Use of a student's name, photo, or video in external publications (such as an School website, local newspaper or media or a promotional brochure).
- Use class, team, club, or school videos/photos that are taken within the school community on the school external website or for marketing purposes.
- Use of a student's name on artwork/material to be displayed in the community.
- Video or audio recordings posted online (may include technologies such as social media and other emerging technologies).

Choose one of the following to indicate your voluntary consent for your child:

☐ I consent for my child's information such as photographs, awards, scholarships, prizes, newsletter information, team lists, assignments or projects, art work, video and/or audio recording, interviews, school publications, advertisements, and promotional materials to be used by my child's school or by Golden Hills School Division

☐ I do not give consent for my child's information such as photographs, awards, scholarships, prizes, newsletter information, team lists, assignments or projects, art work, video and/or audio recording, interviews, school publications, advertisements, and promotional materials to be used by my child's school or by Golden Hills School Division

Note: The Division cannot control how the information may be distributed, including print, broadcasts, photographs, and the Internet (for example, websites, online video and social media).

Note: The school and school division will not approve any provincial or national public media interviews involving students without the express consent of parents.

I, being the parent/legal guardian of the student named below, have read and understand the information provided.

Student's Name:_____Grade:_____

School:_____

_____Date:_____

Parent/Legal Guardian Signature(s) #1

_____Date:_____

Parent/Legal Guardian Signature(s) #2

Note: Only persons having legal guardianship of the student may sign this consent form as parent or legal guardian.

Trinity Christian Academy

Pre-Kindergarten Registration Form 2021-2022

Please submit a copy of your child's Birth Certificate along with your Registration Form.

_____
Student's Name

_____ _____ _____
Students Preferred Name (s) Date of Birth Gender

_____
Parents/Guardian Name Phone number

_____
Parent/Guardian Address Email Address

Program Options

Please indicate your first and second choice.

_____ Monday and Wednesday 3 & 4 year old, 8:45 AM – 11:15 AM
_____ Tuesday and Thursday 4 year old, 8:45 AM – 11:15 AM
_____ Tuesday and Thursday 4 year old, 12:15 PM - 2:30 PM

Students must be three or four years of age by Dec 31, 2021 and fully toilet trained (with the exception of students with special needs.)

Student Information

Has this student been accessed or recommended for Alberta Education PUF support? Yes No

Does this student require any services in the following. Please check all that apply.

☐ Speech Language Therapy ☐ Learning Support ☐ Occupational Therapist ☐ Medical/Behavioral_____

Medical Conditions and/or Allergies:_____
_____

Fees

Program Fee is $1000.00/year, payable in full or in monthly installments. A $100.00 non-refundable deposit is required at the time of registration either by cash or cheque. This deposit will be applied to your September fees leaving a remaining balance of $900.00 to be paid by October 1st. If you prefer to make monthly installments of $100.00 please contact the office at 403-361-3691 or by email at margaret.carlin@ghsd75.ca prior to October 1st. Monthly installments may be made by submitting postdated cheques for the first of each month or with our online portal (www.trinitychristianacademy.ca and click on School Fees found at the top of the Home page).

Parent/Guardian
Signature_____Date:_____