## **LIMESTONE DISTRICT SCHOOL BOARD**

	INT	ΓERI	VAT	ION	IAL	LA	NG	SUA	G	ES	(E	LE	M	ΕN	ITAF	RY)			
REGISTRATION FORM										Age Eligibility: Must be between JK and Grade 8									
المراج	1									Da	te of	Bir	th:				Se	x:	
	Language of Study:													Mont	h Day	Yea	r Ma	ale/Female	
											Attached a copy of your child's report card.								
	Instructor's Name:			Consumable/Activity Fee \$10 PAID  REGISTRATION DATE:															
STUDENT Information	Last Name (Birth Certificate): First										t Name (Birth Certificate):								
	Address:														Apt/Unit:				
	City:						Province:				Postal Code:				le:				
	Home Telephone:							Cell:											
	Contact Email	Address	:																
	Day School Information										Current School Board: Circle one  Grade: Limestone (public) Algonquin (catholic  Other:						atholic)		
	OEN:												e Day School Report Card for dent Ont. Education Number)						
	MEDICAL Information	List any allergies or medical condition we should be aware of:  Will your child require an epipen/other medication during school hours?																	
an	Mother Last Name:									other First Name:									
ardi	Mother Home Tel:								Mo	Mother Cell:									
Gu	Father Last Name:								Fat	Father First Name:									
nt /	Father Home Tel:									Father Cell:									
Parent / Guardian																			
	Parent/Guardian Signature									Date									