

Pre-Kindergarten Registration Form

2024-2025

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

Student's Last Name	Student's First Name (Please Print)	Date of Birth	Gender
Preferred Student's First	Name		
Parent/Guardian Name		Phone	Number
Parent/Guardian Address Email Address		Address	
Program Options			
Please indicate your first			
	Wednesday Morning 8:40 AM – 11:20 AM		
	Wednesday Afternoon 12:00 PM – 2:40 P	M	
	Thursday Morning 8:40 AM – 11:20 AM		
Tuesday and	Thursday Afternoon 12:00 PM – 2:40 PM		
Students must be three	years of age and fully toilet trained (with	the exception of student	s with special needs.)
Student Information	<u>n</u>		
Has this student accessed	or been recommended for intervention servi	ices? Yes No	
If yes, please check all tha	t apply:		
Speech Language Thera	py \square Learning Support \square Social/Emotional	l Behavioral Support 🔲 (Occupational Therapist
If your child has been asso	essed, please indicate who recommended it?	(Example: Child's Dr)	
Allergies:			
<u>Fees</u>			
(please postdate the checchild's name in the messa Government Grant. Eligib government (meaning eligible) the beginning of the year by cash, eTransfer, or pos	for the full year. A \$125.00 deposit is required ue to August 31, 2024) or you may e-Transferge). This deposit will be applied to your Septicle families may apply for a \$125 per month a gible families can access the program for free or monthly (\$125) on the first of the month stated cheques for the first of each month to (www.trinitychristianacademy.ca and click on Que	er to tca.info@ghsd75.ca (ember fees unless you are affordability preschool grade after receiving the grant starting in October. Monto the office. You may also	please ensure to put your approved for the Alberta nt through the Alberta). Fees can be paid in full at hly payments may be made pay online through our
I would like to pay: 📗 Oı	nline Post-Dated Cheques	Cash	er
Parent Information			
Parent			
Signature			



STUDENT REGISTRATION FORM

The personal information requested on this form is being collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act (FOIP), the Education Act and its regulations, and the Canadian Charter of Rights and Freedoms, Section 23.

Parents/guardians are responsible to ensure the accuracy of this information and to report changes.

2024-2025 Name of School: **School Year:** Alberta Student Number: STUDENT INFORMATION: Legal Given Name(s): Legal Middle Name: Legal Surname: Preferred Surname: Preferred Given Name: Birth Date: Gender: Grade: Student's Physical Address: Year / Month / Day Student Email Address: City: Postal Code: **Primary Phone Number:** Student Cell (if applicable): Does this student have any life-threatening medical conditions (please list): 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 Behavioural Support ☐ Individual Program Plan and/or Individual Support Plan \square Other: Language Citizenship: Temporary or Permanent Resident: **Independent Student: Immigration Document** Primary Spoken: Canadian □Yes □No Expiry Date: Permanent Resident Temporary Resident □ Year / Month / Day Other (please specify) \square Has your student previously attended a Golden Hills School? Last School Attended (name of school and city): □Yes PARENT/GUARDIAN INFORMATION: Information for ALL parents/legal quardians must be provided Parent/Guardian #1 Name: Relationship to Student: ☐ Has Custody ☐Lives With Postal Code Mailing Address: City: Rual Students - Legal Land Description: 1/4 Sec 911 Adress (blue sign) Twnshp Range Sec **Email Address:** Phone (home): Phone (cell): Phone (work): Parent/Guardian #2 Name: Relationship to Student: ☐ Has Custody ☐ Lives With Mailing Address: Postal Code City: Rual Students - Legal Land Description: 1/4 Sec Sec Twnshp Range 911 Adress (blue sign) Phone (home): **Email Address:** Phone (cell): Phone (work): **EMERGENCY CONTACT INFORMATION:** (Contact other than parents - used in emergencies only) Contact #1: Relationship to Student: Phone (home): Phone (cell): **Email Address:** Contact #2: Relationship to Student: Phone (home): Phone (cell): Email Address:

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STUDENT LIVES WITH:				
☐ Parent/Guardian #1 ☐ Parent/Guardian #2 ☐ Both ☐ Other - please specify: (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?				
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? \Box Yes \Box No				
B. If yes, do you wish to exercise your right to have your child receive a Francophone education? ☐ Yes ☐ No				
If you wish to declare the student is First Nations, Métis or Inuit please select one: ☐ First Nations (status) ☐ First Nations (non-status) ☐ Métis ☐ 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.				
If student resides on a reserve, please provide the following:				
Band Number: Treaty Number:				
Legal Document used to verify registration: (select one) PLEASE PROVIDE A COPY with registration:				
☐ Birth Certificate ☐ Permanent/Temporary Resident Documents ☐ Passport ☐ Official Stats Canada Documents				
☐ Work or Study Permit ☐ Canadian Citizenship Document ☐ Adoption Papers				
I hereby certify the foregoing information is correct, and complete, to the best of my knowledge and belief. This is confirmation that I have provided information for <u>ALL</u> parents/legal guardians of the student.				
Parent/Guardian Signature: Date:				

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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 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 Education 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.



Golden Hills School Division

Freedom of Information and Protection of Privacy (FOIP) Act

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. Consent 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 a 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 photogonal information, team lists, assignments or projects, art work school publications, advertisements, and promotional managements of Golden Hills School Division	x, video and/or audio recording, interviews,
I do not give consent for my child's information sur newsletter information, team lists, assignments or project interviews, school publications, advertisements, and pro- school or by Golden Hills School Division	ts, art work, video and/or audio recording,
Note: The Division cannot control how the information me photographs, and the Internet (for example, websites, onli	
Note: The school and school division will not approve an involving students without the express consent of parents.	
I, being the parent/legal guardian of the student named be provided.	low, have read and understand the information
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.