

Application for Admission

Date	Requested date of admission		
Family Name_Phone (H)	Home Address		
Mother/Guardian	Email	Cel	l
Father/Guardian	Email	Cel	l
Child's NameSurname	First	Middle	M/F Grade
Child's NameSurname	First	Middle	M/F Grade
Child's NameSurname	First	Middle	M/F Grade
For Kindergarten Families please chose Part-time (M,W,F)Fulltime (M-F)			
Church (if applicable)			
Name & address of previous school is applicable			
Identified Special Educational / Behavioural Needs?			
Additional Information / circumstand	ces		

Please include a Pastoral letter and a \$250 deposit with your application submission. Thank you