



Telephone: 519-753-6079

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REGISTRATION FORM – PUNJABI SECONDARY SCHOOL CREDIT

Classes begin Saturday, September 15, 2018, 9:00 a.m. to 11:30 a.m.

Classes end Saturday, June 22, 2019



Student Name: _____ Male: ___ Female: ___

Ontario Education Number: _____ Email: _____

Address: _____ Postal Code: _____

Home Telephone: _____ Birth Date: _____
(MM/DD/YYYY)

Medical Concerns: _____

Parent/Guardian Name: _____

Business Telephone: _____ Cell Phone: _____

Emergency Contact: _____ Telephone: _____

I have obtained the consent of the person above to have their name and telephone number used for emergency purposes. If yes, check here

Are you currently a secondary school student? Yes ___ No ___

If yes, name of current school: _____

Note: this form must be signed by a parent/guardian if student is under the age of 18 years; if student is over 18 years, only student signature is required.

Parent/Guardian Signature

Student Signature

Print Name

Print Name