

**IF YOU REGISTERED ON-LINE: BRING THIS COMPLETED FORM TO THE FIRST NIGHT OF CLASS  
TO REGISTER ON-SITE: BRING THIS COMPLETED FORM WITH YOU TO REGISTER**

**PLEASE PRINT CLEARLY:**

Student's Name:

\_\_\_\_\_ Last Name First Name Date of Birth (mm/dd/yyyy)

Address:

\_\_\_\_\_ Number Street Apt No City Postal Code

Contact Numbers:

\_\_\_\_\_ Home Cell

E-mail:

\_\_\_\_\_ (MANDATORY TO BE REGISTERED)

Day School:

\_\_\_\_\_

OEN:

\_\_\_\_\_ (MANDATORY TO BE REGISTERED)

Enrolled in High School: Full-time (3 or more classes)  **OR** Part-Time (1 or 2 classes)

**CHOOSE ONLY ONE COURSE, ONE SCHOOL, AND ONE SEMESTER.**

**Semester 1: September 20, 2016 – January 17, 2017 - On-site registration September 15, 2016 6:00-8:00**

Cathedral  St. Jean de Brebeuf

Course Code \_\_\_\_\_  New Course  Repeat Course Previous Mark \_\_\_\_\_

**OR**

**Semester 2: February 14, 2017 – June 8, 2017- On-site registration February 9, 2017 6:00-8:00**

Cathedral  St. Jean de Brebeuf

Course Code \_\_\_\_\_  New Course  Repeat Course Previous Mark \_\_\_\_\_

**OR**

**CREDIT LANGUAGES: Sept. 19, 2016 – May 29, 2017 - On-site registration Sept. 15, 2016 6:00-8:00  
at St. Charles East 5<sup>th</sup> Street Course Code \_\_\_\_\_**

As a parent/guardian of the above noted student, I approve for my son/daughter to attend Night School.

\_\_\_\_\_  
Parent/Guardian Signature (if under 18 years old) Date

\_\_\_\_\_  
Student Signature Date

A student attending day school may enrol in a Night School credit course with written permission from principal/designate.

**PERMISSION GRANTED BY DAY SCHOOL**

Does this student have an IEP?  No  Yes (please provide copy)

\_\_\_\_\_  
Principal / Designate Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date