

ST. HELEN'S SCHOOL

3894 Triumph Street

Burnaby, B.C.

V5C 1Y7

APPLICATION FORM 2018/ 2019

Legal Family Name: _____ **Child's Legal Name:** _____

Male [] **Female** [] **Legal Middle Names:** _____

Address: _____ **Date of Birth:** _____

City: _____ **Place of Birth:** _____

Postal Code: _____ **Citizenship:** _____

Home Phone #: _____ **Present School:** _____

Grade in 2018/ 2019 _____ **Care Card:** _____

.....
Father's Name: _____ **Mother's Name:** _____

Occupation: _____ **Occupation:** _____

Email Address: _____ **Email Address:** _____

Work Number: _____ **Work Number:** _____

Citizenship: _____ **Citizenship:** _____

Parishioner of St. Helen's: _____ **Sunday Envelope #:** _____

Other Parish (Please specify) _____

Catholic: _____ **Non Catholic:** _____ **Catholic:** _____ **Non Catholic:** _____

Pastor's Signature: _____ **Tuition Category** _____

THIS APPLICATION MUST BE RETURNED TO THE SCHOOL OFFICE WITH THE **ORIGINAL BIRTH AND BAPTISM CERTIFICATES AT YOUR EARLIEST CONVENIENCE**. THIS APPLICATION WILL BE KEPT ON FILE UNTIL DECEMBER 31ST, 2017 AFTER WHICH TIME THOSE FAMILIES WHO STILL WISH TO BE ON THE WAITING LIST WILL BE EXPECTED TO RENEW THEIR APPLICATION FORM.

I UNDERSTAND THIS IS ONLY AN APPLICATION AND DOES NOT CONSTITUTE REGISTRATION. I AM AWARE THAT IF THERE IS AVAILABLE SPACE, I WILL BE CONTACTED REGARDING REGISTRATION.

(Signature)

(Date)

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FOR OFFICE USE ONLY: **BIRTH CERT.** _____ **BAPTISM CERT.** _____

SIBLINGS: **NAME:** _____ **GR.** _____ **D/O/B** _____

NAME: _____ **GR.** _____ **D/O/B** _____

(Date Received)