

HOLY CROSS SCHOOL

1298 Main Street
Penticton, BC
V2A 5G2

Phone: 250-492-4480

Fax: 250-490-4602

email: holycross@telus.net web site: www.holyc.com



REGISTRATION PACKAGE

Dear Holy Cross Parents:

I would like to take this opportunity to thank all the families for their support of Holy Cross School. We have a great community with which I am fortunate to be involved. In efforts to improve the long-term sustainability and planning for your children's education, we are implementing the following changes to our registration system that will allow us to move forward in delivering the best educational experience for your family.

Each family is asked to fill out the following registration package. As always, each family is asked to include 10 postdated cheques for tuition. These cheques can be dated for any day of the month. This year, we are asking each family to date the first month's tuition for July 5, 2010. This non-refundable cheque will be cashed and credited to your September tuition. This advance payment procedure, common in most other schools in our diocese, will ensure placement for your child(ren) at Holy Cross School, alleviate some of your financial burdens in September, and finally, inform the administration of class composition for the 2010-2011 school year.

I firmly believe this change to our current system will allow Holy Cross School to budget accordingly, provide teacher assignments, order classroom supplies, and give us a greater sense of direction long before the new year begins in September. Ultimately, your sons and daughters will be the beneficiaries of this early registration requirement.

If you require additional information, please contact me at the school.

Yours truly,

Mr. J. Brophy
Principal, Holy Cross School

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LETTER OF COMMITMENT

Dear Parents:

Please fill out this form for the **next school year**, September 2010-2011. Your anticipated support is greatly appreciated.

Thank you,

Mr. J. Brophy
Holy Cross School
Principal

___ Yes, our family will be attending Holy Cross School in September 2010.

___ No, our family will not be attending Holy Cross School in September 2010.

Parent's Name: _____

Parent's Signature: _____

Student's Name: _____ Grade: (2010/11) _____

Student's Name: _____ Grade: (2010/11) _____

Student's Name: _____ Grade: (2010/11) _____

Student's Name: _____ Grade: (2010/11) _____

Student's Name: _____ Grade: (2010/11) _____

Holy Cross School 2010-2011

Parent Volunteer and Participation Commitment

Please complete this form and return to the school office along with your child's registration. Your time and involvement directly contributes to the education experience for our children and helps us to manage the cost of running our school while allowing us to keep our tuition rates the lowest in our Diocese. Please indicate your first three choices – numbered in the boxes in order of your preference with 1, 2 and 3. You will be contacted closer to the time of the event or activity to learn more about how the event or activity is run – and how you can help. Included on this form is a space where we ask for your occupation or business. Often the school may have a specific concern and it is very helpful to ask someone within our school that can give us direction or advice. If we need to hire someone to fix something, we would prefer to use a business or person connected to the school.

The following is a list of events and activities that assist the school financially. We ask that each Family contribute a minimum of 5 hours of volunteer time per year. Completed volunteer hours will be kept on file at the school office and it is up to you to ensure that your time is recorded and completed.

Please enclose a cheque for \$100.00. This money will be returned at the end of the school year once your volunteer hours are completed or a tax receipt will be issued to you for the balance of incomplete hours.

Family name: _____ Phone: _____

Occupation / Business: _____ E-mail: _____

Walk-a-thon – Fall of 2010

- set up at King's Park []
- refreshment service []
- course management []
- clean up []

Spring Fling – Black Tie Dinner and Dance – Spring of 2011

- join a committee (requires reg evening meetings) []
- organization of donations []
- tear down and return of uncollected items to school []
- settling accounts with auction winners []
- donation acquisition (soliciting donations) []
- moving donations and set up of venue []
- games []
- managing bid sheets []

Shopping Card Fund-Raiser (ongoing)

- assistance with sales at other sites – i.e. church events []
- assistance with card sales and distribution at Christmas time []

South Okanagan Events Center (ongoing)

- volunteer hours at concession stand for hockey & concerts []

Hot Lunch Program:

- Preparing food on site []
- Serving hot lunch (10 am to 1 pm on Fridays) []

PSG Events

- Open House BBQ []
- Spaghetti Dinner []
- PSG Executive []

Around the school:

- Playground supervision (assistance to duty teacher) []
- Assist with building maintenance []
- School ground clean up []

Call me where you need help []

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APPLICATION FOR STUDENT REGISTRATION: BOY: _____ GIRL: _____

Grade Applied for: _____ School Last Attended: _____

Surname: _____ Given Names: _____

DOB: y/m/d _____ Place of Birth: _____

Citizenship: _____ First Nations Status: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Street Address (if different from above): _____

Home Phone: _____ Student's Religion: _____

Email Address (for school correspondence): _____

Father's Name: _____ Parish: _____ Envelope #: _____

Father's Address: (if different from above) _____

_____ Postal Code: _____

Cell Phone: _____ Business Phone: _____

Father's Occupation: _____

Canadian Citizen: _____ Landed Immigrant: _____ First Nations Status: _____

Mother's Name: _____ Parish: _____ Envelope #: _____

Mother's Address: (if different from above) _____

_____ Postal Code: _____

Cell Phone: _____ Business Phone: _____

Mother's Occupation: _____

Canadian Citizen: _____ Landed Immigrant: _____ First Nations Status: _____

Emergency contact: Name: _____

Relationship to Child: _____ **Home Phone:** _____

Cell Phone: _____ **Business Phone:** _____

Please list any medical problems/allergies the school should be aware of:

Please list any legal alerts/custody issues the school should be aware of:

Family Physician: _____ **Phone:** _____

Student's Care Card Number: _____

Date and Place of Baptism: _____

Date and Place of First Communion: _____

Date and Place of Confirmation: _____

Please attach a copy of your child's birth certificate and baptismal certificate (if applicable) with this application.

Holy Cross is dedicated to meeting the learning needs of all students. Information is key to the effectiveness of programming planning. Please state any information/diagnosis that would be helpful for the school to know regarding meeting their learning needs. (ex. ADHD, visual/hearing problems, dyslexia, autism, behaviour disorders, etc.)

I hereby certify that the information above is complete and correct.

Date: _____

Please list any younger siblings.

Name: _____ **Age:** _____ **Gender:** _____

Name: _____ **Age:** _____ **Gender:** _____

Name: _____ **Age:** _____ **Gender:** _____

Personal Information Privacy Policy

1. I consent to having Holy Cross School collect personal information that may include student identification information, birth certificate, legal guardianship, court orders if applicable, parents' work numbers and email address, behavioral, academic and health information, most recent report card, emergency contact name and number, doctor's name and number, health insurance number and any similar information needed for registration.

I further consent to the use and disclosure of information contained in this form and otherwise collected by or on behalf of Holy Cross School (1) for the purpose of establishing, maintaining, and terminating the student's or parent's relationship with Holy Cross School, (2) for additional purposes identified when or before personal information is collected, and (3) as otherwise provided in Holy Cross School's Personal Information Privacy Policy, a copy of which is available on request. I also consent to the collection, use and disclosure of such personal information by and to agents, contractors and service providers of Holy Cross School.

This information is required in order to register your child at this school and assist the school authority in making an informed decision as to your child's suitability and appropriate placement in the school. It will also allow the school to respond immediately to an emergency. For more information, the privacy officer for Holy Cross School is The Principal and may be reached at (250) 492-4480.

2. I consent to having photographs and work samples of my child(ren) used by Holy Cross School in the yearbook, newsletters, newspapers and other promotional material. Yes _____ No _____

3. I consent to the school using contact information on phone lists (car pool list, class list, Parent Support Group, etc). Yes _____ No _____

4. I consent to my child(ran)'s picture appearing on the Holy Cross School website. (Names will NOT be published on the website.) Yes _____ No _____

5. I consent to my child(ren)'s picture appearing on the Holy Cross School website in group photos only. (Names will NOT be published on the website.) Yes _____ No _____

6. I give permission for my child to participate in school activities off school grounds that are part of the school's curricular or extra curricular programs. I understand that activities where transportation other than walking is required, a special permission form will be sent home before the event. Yes _____ No _____

5. I acknowledge that my vehicle insurance information and driving record are required by the school to protect against third party liability claims in case of an accident, should I use my vehicle to drive for the school. I understand that this information will only be released in the event of an accident.

Parent/Guardian: (Print) _____

Signature: _____ Date: _____

Appendix A

The following are suggested formats for Student Registration Forms to verify parental/legal guardian lawful admission to Canada and residency in British Columbia. This information should be included in the General Student Record.

LEGAL RESIDENCY OF PARENT

(if parents are deceased, use Appendix B)

To be completed and signed by a parent or legal (court-appointed) guardian. If legal guardian, attach a copy of court order appointing you as legal guardian.

(Lawfully admitted into Canada)

1. I am (please X one):

- A Canadian citizen (if not born in Canada, please attach photocopy of citizenship paper/card)
 - A landed immigrant (attach photocopy of landed immigrant status paper)
 - Lawfully admitted to Canada under one of the following documents (please mark the appropriate box below and attach photocopy of document):
 - Admission as a refugee claimant
 - A person claiming refugee status who has a letter of no objection
 - Student authorization (student visa) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
 - Employment authorization (working permit) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
 - A person carrying out official duties as a diplomatic or consular official (with a foreign representative acceptance counter foil in his/her passport)
 - Other - document description: (must be cleared with Immigration Canada) _____
-
-

(Residency in British Columbia)

2. I am a resident of British Columbia (please X one):

- Yes Residency address: _____

- No I am not a resident of British Columbia

Confirming signature:

3. Parent's/legal guardian's name: _____

Parent's/legal guardian's signature: _____

Date: _____

RE-REGISTRATION CHECK LIST

To ensure that your registration package is complete, and for your convenience, we have included a checklist of all the documents that must be returned to Holy Cross School. Please take the time to fulfill **all** these requirements.

____ Your signed **Letter of Commitment** stating your plans to attend or not attend Holy Cross School in September 2010.

____ **A non-refundable deposit postdated for July 5, 2010.** This will be cashed and applied to September's tuition.

____ Tuition cheques (**9**) postdated for **October-June 2010/2011.**

____ Your **Parent Volunteer** form stating your willingness to help out in the various activities that occur at Holy Cross School.

____ A cheque for **\$100.00 (dated September 2010)** This money will be **returned** at the end of the school year once your volunteer hours are completed or this money can be "rolled" over to the next year and it will be returned when your family leaves the school in grade 8.

____ Application for Student Registration

____ Legal Residency of Parent Form

TUITION SCHEDULE 2010-2011

Parish Family Rates

First Child \$ 150.00/month

Family Rate \$ 240.00/month
(2 or more children)

Regular Rates

First Child \$ 180.00/month

Family Rate \$ 300.00/month
(2 or more children)