

## HOLY CROSS SCHOOL

1298 Main Street  
Penticton, BC  
V2A 5G2

Phone: 250-492-4480

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### KINDERGARTEN REGISTRATION PACKAGE

Dear Parents:

Thank you for your interest in Holy Cross School. It is my pleasure to welcome each of you to our community. We have a great school and with your help and support, I am confident that we will meet and exceed all of your expectations.

Please submit the required documents that will complete your registration into Holy Cross School.

Each family is asked to include 10 postdated cheques for tuition. **These cheques are to be dated the first of each month. This year, we are asking families to date the first month's tuition for July 3, 2012.** 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 2012-2013 school year.

In addition to cheques for tuition, we are requiring all families to fill out a volunteer form as a way to get involved in our community and help out in areas that make our school a great learning environment for our students. Families are asked to submit a \$100.00 cheque that will accompany this volunteer form. This cheque will be cashed in September and be returned at the end of the year, when your 5 volunteer hours are completed. For simplicity sake, this money can be "rolled" over in our system and returned when your family leaves the school.

If you require additional information, please contact me at the school. I look forward to working with you as we begin or continue our life-long journey in Catholic education.

Yours truly,

Mr. J. Brophy  
Holy Cross School, Principal.

# Holy Cross School 2012-2013

## 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. If requested, this money will be returned at the end of the school year or when your child leaves the school.**

Family name: \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation / Business: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Walk-a-thon

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

### Black Tie Dinner and Dance Silent Auction

- 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 (ren)'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) \_\_\_\_\_

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#### *(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: \_\_\_\_\_

## **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.

\_\_\_ **A non-refundable deposit cheque postdated for July 3, 2012.** This will be cashed and applied to September's tuition.

\_\_\_ Tuition cheques (9) postdated for **October-June 2012/2013. (Dated the first of each month)**

\_\_\_ 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 2012)** 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.

\_\_\_ A copy of your child's Birth Certificate

\_\_\_ Application for Student Registration

\_\_\_ Legal Residency of Parent Form

## **TUITION SCHEDULE 2012-2013**

### Parish Family Rates

First Child \$ 160.00/month

Family Rate \$ 260.00/month  
(2 or more children)

### Regular Rates

First Child \$ 195.00/month

Family Rate \$ 330.00/month  
(2 or more children)

Parish Family Rates applies to those families who are registered and practicing (regular Mass attendance) in a Catholic Parish.

**Please note that all post-dated cheques are to be dated on the first of each month.**