

POINT GREY SECONDARY SCHOOL

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Telephone: (604) 713-8220 ▪ Fax: (604) 713-8218 ▪ Website: www.vsb.bc.ca/schools/point-grey

GRADE 8 REGISTRATION 2023 - 2024

The Following **PHOTOCOPIES MUST** be Included with the Registration Form

- Proof of Address:
Homeowners - Recent Property Statement or Purchase Agreement
Renters - Rental Agreement **PLUS TWO** bills showing name and address
- Proof of Canadian Citizenship: Birth Certificate, Immigration/Citizenship/Permanent Resident Documentation
- If child DOES NOT reside with parents, include legal proof of Guardianship or Custody Papers
- Copy of Most Recent Report Card

STUDENT INFORMATION (Please print clearly)

Legal last name:	Present Elementary School:
Legal first name:	PEN # if NOT attending a VSB school:
Preferred first name:	Address:
Legal middle name:	City: Postal Code:
Birthdate: (DD/MM/YY)	Home #
Male <input type="checkbox"/> Female <input type="checkbox"/>	Student Email:

STUDENT CITIZENSHIP INFORMATION (Please print clearly)

Country / Province of Birth:	Citizen of:	First Language:
If not a Cdn. Citizen, date of entry into Canada: (DD/MM/YY):		
Language at home:	Language Most Used:	

STUDENT MEDICAL INFORMATION (Please print clearly)

Care Card #		
Allergies / Conditions:	No <input type="checkbox"/> Yes <input type="checkbox"/>	Life Threatening? No <input type="checkbox"/> Yes <input type="checkbox"/>
If yes, what?	If yes, what?	

Does student have special learning needs? No Yes

If yes, specify:

Student has an IEP? No Yes

Is student receiving Resource Support? No Yes

Has student received ELL Support? No Yes

Indigenous Ancestry: No Yes

PARENT / GUARDIAN INFORMATION (Please print clearly)

Living with student: No Yes

Emergency contact: No Yes

Legal last name: _____

Legal first name: _____

Email : _____ Home# _____

Cell # _____ Work # _____

Relation to student: _____

Who has legal custody? _____

Same as student's address: No Yes

If **not** living with student provide address: _____

Address: _____

City: _____ Postal Code: _____

PARENT / GUARDIAN INFORMATION (Please print clearly)

Living with student: No Yes

Emergency contact: No Yes

Legal last name: _____

Legal first name: _____

Email : _____ Home# _____

Cell # _____ Work # _____

Relation to student: _____

Who has legal custody? _____

Same as student's address: No Yes

If **not** living with student provide address: _____

Address: _____

City: _____ Postal Code: _____

EMERGENCY CONTACT INFORMATION: OTHER THAN PARENT

Last Name: _____

First Name: _____

Relationship to Student: _____

Home #: _____

Cell #: _____

Work #: _____

Last Name: _____

First Name: _____

Relationship to Student: _____

Home #: _____

Cell #: _____

Work #: _____

EMERGENCY CONTACT: OUT OF PROVINCE / COUNTRY (Call in the event of a Natural Disaster)

Last Name: _____ First Name: _____

Relationship to Student: _____ Does this person speak English? No Yes

Home #: _____ Cell #: _____ Work #: _____

COURSE INFORMATION (Minimum of 8 Courses)

- **Core courses:** English, French, Mathematics, Physical Education, Science, Socials, Applied Design Skills & Technology (a term in each of the following: Business Education, Home Economics, Computer Science)

French Have you been enrolled in French Immersion? No Yes

- **Elective: Fine Arts** (Subject to change) **Indicate your 1st, 2nd, & 3rd choice from the following:**

	Band 8	Have played a band instrument before. <u>GUITAR</u> and <u>PIANO</u> are NOT band instruments.
	Beginners Band 8	Have NOT played before
	Strings 8	Have played before
	Beginners Strings 8	Have NOT played before
	Choir 8	No previous experience necessary
	Drama & Art 8	1/2 year each

Parent Name: _____ Date (DD/MM/YY): _____