St. Mary's Catholic Independent School
1701-5th St. S., Cranbrook, BC V1C 1K1
Phone: 250-426-5017 ~ E-mail: smc.office@cisnd.ca ~ Website: smc.cisnd.ca

Considering St. Mary's Catholic School?

1. Read through our website and **Parent Handbook**
2. Begin the registration process by emailing your child's most recent report card to **smc.office@cisnd.ca.**
3. Print or pick up the **New Student Registration Application** for the correct school year.

   If you leave your full name, phone number and email address, we can add you to our list and contact you when the new registration packages are available.
4. Book a family interview and tour of the school with the principal.
5. Once the registration package is complete and submitted, it is reviewed.
6. Notification of acceptance. Payment of fees must be made.

   This includes EFT set up for tuition, and that registration, classroom fees, and the capital building fees are paid.
7. Notification from our school office of official and complete registration.
8. Ask for our school supply list for grades 1-7 (see the office for order details)

To be considered, we require copies of the following:

☐ Birth certificate
☐ Baptismal certificate (if applicable)
☐ Legal documentation of the parent (if not born in Canada)
☐ Court order outlining custody agreement for student (if applicable)
☐ Court order outlining legal guardianship for student (if application)
☐ Most recent report card
☐ Most recent Individual Education Plan (IEP) (if applicable)



The following fees are also required to be officially registered:

☐ Registration fee/family
☐ Capital Fee/family
☐ Activity Fee (Price is determined by grade)
☐ Tuition set up* (EFT required)
☐ Administrative fee (if after April 30th, 2026)

*First Month's tuition is required for new families and Grade 7 students. Fees are non-refundable

February 2026

Dear Parents,

I appreciate your interest in St. Mary's Catholic Independent School! Our school provides your child with a top-notch academic education and instills a strong moral and spiritual foundation. We pride ourselves on fostering a safe and nurturing environment that feels like a second family to all our students. We believe in maintaining a close partnership between the school and home to ensure each child's success. As a school community, we take great pride in our achievements in instilling compassion and service in our students.

At St. Mary's School, we adhere to the BC Ministry of Education Curriculum and employ highly dedicated BC certified teachers. In addition to academic excellence, we offer a well-rounded education that includes spirituality, sports, fine arts, public speaking, leadership, service to others, and a buddy system for primary and intermediate students. Our school boasts bright, beautiful learning spaces and an exceptional Outdoor Education program that sets us apart. **We are currently a K-6 elementary school. New this year, we are offering grade 7.** We have a proposal to continue to grow with the grade 7 program, adding grade 8 in 2027 and grade 8 in 2028.

In addition to the core curriculum, we offer opportunities for students to participate in band, Music, Intermediate French, Speech Arts, and Technology. Our school also provides a variety of extracurricular activities that enrich our students' learning experience. We are committed to providing a comprehensive education that prepares students for success in all areas of life. Our Student Services program plays a crucial role in providing early intervention support to numerous families, and we are honoured to make a positive impact on their lives.

We are thrilled to announce that our educators have undergone extensive training to deliver top-notch literacy instruction across all grade levels. By using literacy screeners, we can tailor our English Language Arts (ELA) curriculum to meet each student's individual needs. Our comprehensive literacy program has been thoughtfully curated to ensure seamless transitions between grade levels and to encompass a wide array of skills necessary for proficient reading, spelling, and writing. We are committed to fostering a love of learning and literacy in our students and to providing them with the tools they need to succeed academically and beyond.

St. Mary's Daycare, After School Program, and Summer Programs offer convenient on-site services for families in need of childcare. Our programs operate daily from 8:00 A.M. to 5:00 P.M. and 8:30 A.M. to 5:30 P.M. respectively. To register or for more information, please contact our main office at #250-426-5017.

To ensure a smooth transition into the next school year, each family must complete **their registration before April 6th, 2026**. After April 6th, an administrative fee of $150 will be added. Delayed registration poses challenges for budgeting and classroom organization for the upcoming academic year. Please note that classroom placements are not guaranteed until registration is finalized, fees are paid, and EFT is set up. Your early registration is greatly appreciated, as it allows us to plan classroom assignments efficiently, procure necessary supplies, and extend contracts to returning staff members before summer break. Thank you for your understanding and support in this matter.

At St. Mary's School, our motto is:

"Take Care: Take Care of yourself, Take Care of each other and Take Care of St. Mary's."

We are looking forward to working with you in 2026-2027!

Vanessa Fer, Principal

February 2026

Dear Volunteer:

Thank you for your interest in volunteering at our school. Volunteers strengthen our school community and are much appreciated. Before you volunteer, in the interest of protecting you and our children, our Diocesan Safe Environment Policy requires that you:

- Provide a clear criminal record check (This must be done using our school code)
- Attend a Safe Environment Policy Application session (and complete a Confidentiality agreement)
- Receive approval from the Diocese Safe Environment Office
- Renew both the Criminal Record Check Application (CRC) and Safe Environment Application (SEA) every five years.

Criminal Record Check (CRC)

The Criminal Record Check Application is available at the school office and at Safe Environment sessions for volunteers to complete. Upon successful application, our Safe Environment Office of the Diocese of Nelson will send confirmation to the school office. The school office will then send an email of confirmation to the applicant, provided the applicant has also completed a Safe Environment Application. A new Criminal Record Check (CRC) must be provided every five years.

Safe Environment Training Application

Attend a Safe Environment Policy Session and complete a Safe Environment Application. This can be booked with the principal. smc.principal@cisnd.ca

A Safe Environment Application (SEA) must also be completed every five years.

Parent Driver's

St Mary's students frequently go on field trips and appreciate parents who will help transport students (and chaperone the trip). The following is required to be a parent driver: driver's $3,000,000 insurance liability, a valid driver's license (a copy of the front on file), a valid criminal record check (through our online service), safe environment training, and a valid driver's abstract. See the instruction sheet in the registration package.

Volunteer approval will be complete only when the school receives written acknowledgement from the Diocese of Nelson's Safe Environment Office of both a successful criminal record check and a Safe Environment Application. Ask the office for the instructions. We love our volunteers!

ST. MARY'S CATHOLIC INDEPENDENT SCHOOL
2026-2027 Registration, Tuition & Fee Form

As an Independent School in British Columbia, St. Mary's Catholic Independent School receives only 50% of the per-student operating costs of the local public school district from the British Columbia government, under the Independent School Act. Independent schools are not entitled to government funding for capital expenditures. Modest tuition fees, donations, and school fundraisers cover any shortfall in operating and capital costs.

Tuition fees are tax-deductible as a charitable tax credit.

Tuition Rates for 2026-2027	Classroom Fees (Student rate)	Other Fees (Family rate)
1st Child - $380.00 a month 2nd Child - $255.00 a month 3rd Child - $140.00 a month 4th Child - Free	Kindergarten $150 (Supplies) Grade 1-7 $100 (Planner & Activities)	Registration Fee $80/year Capital Building Fee $100/year

An administrative Fee of $150 is added for any registration applications submitted after April 6th, 2026.
Grade 7 registration requires payment of the first month of tuition as a non-refundable deposit.
The income tax receipt is issued to the person paying the tuition fee.

Students Name (First and Last Name)	Grade (K-7)	Start Date (Sept. 8th, 2026)	Classroom Fee	Tuition fee/month *Office only
1.				
2.				
3.				
4.				

Add Reg. & Capital fee	$180
(Add admin. fee after April 6, 2026)	($150)

Total for fees: _____ Total month Tuition: _____

Office signature:
Fees paid by e-transfer_____Cash _____Check_____
Tuition EFT set up complete: _____ Grade 7 Pre-paid 1st month tuition: _____

Methods of payment: EFT required for tuition. Pre-authorized payments will be established for monthly withdrawals starting on August 16th (for September) and continuing through June on the 16th of each month: void cheque and completion of the PAD form required.

Please note: In the event of withdrawal, a one-month written notice is required to stop EFT.

Parent Name: _____ (Please print full name) **Date:** _____

Address: _____ **Signature:** _____

Pre-Authorized Debit Agreement

ST. MARY'S CATHOLIC INDEPENDENT SCHOOL

1701-5th Street South, Cranbrook BC V1C 1K1
Phone: 250-426-5017 • Fax: 250-426-5076

Payor (Parent) Name: _____

Account Information

☐ My account information is the same as the previous school year. (Void cheque not necessary.)

☐ New authorization. My account information is not on file.

☐ My account information has changed.

Attach void cheque here

Pre-Authorized Debit Details

I, the Payor, authorize *St. Mary's Catholic Independent School* and the financial institution designated (or any other financial institution I may authorize at any time) to begin deductions as per my instructions for tuition payments and/or any other outstanding amounts due from time to time. I understand that the *Roman Catholic Bishop of Nelson* will administer this PAD Agreement. These services are for personal use.

Regular monthly payments for the full amount of tuition expenses will be debited to (i.e. withdrawn from) my specified account on or about the 16th day of the months of September to June.

I may revoke my authorization at any time subject to providing at least 30 days written notice. To obtain a sample cancellation form or more information on my right to cancel a PAD agreement, I will contact my financial institution or visit www.cdnpay.ca.

Signature

Signature of Account Holder: _____

Name (print): _____

Date: _____

Signature of Joint Account Holder (if applicable): _____

Name (print): _____

Date: _____

I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on the my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.

St. Mary's Catholic Independent School

"Hand in Hand with Jesus – "Where Faith & Knowledge Meet"

STUDENT APPLICATION FORM

St. Mary's Catholic Independent School
250-426-5017
smc.cisnd.ca

2026-2027

ST. MARY'S CATHOLIC INDEPENDENT SCHOOLS
APPLICATION FOR ADMITTANCE

1701-5th Street South
Cranbrook BC V1C 1K1
Phone: (250) 426-5017
Fax: (250) 426-5076
Email: smc.office@cisnd.ca
smc.cisnd.ca

(For office use only)
Date Received: _____
Interview Date: _____
Accepted: Yes ☐ No ☐
On a wait list: Yes ☐ No ☐
Date: _____
Principal's Signature:
_____

Please attach student photo

Join our 'closed' page @ St Mary's PSG Info Board

Candidate Information

Student's Name: _____ _____ ☐ M ☐ F
Surname Given Name(s)

Date of Birth: _____ Birthplace: _____ Religion: _____ Parish: _____
dd/mm/year

Address: _____ Postal Code: _____

Date of Admission: _____ Grade: _____ Current School: _____

Band Name & Number (if applicable): _____ ☐ Aboriginal Ancestry

Canadian Citizen ☐ Landed Immigrant ☐ on Student Visa ☐ Other: _____

Primary Language Spoken at Home: _____

Family Information

Father's Information Deceased ☐ Place of Employment: _____

Name: _____ / Occupation: _____

Address: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Email: _____

Canadian Citizen ☐ Landed Immigrant ☐ Work Permit: Yes ☐ No ☐ Other: _____

Mother's Information Deceased ☐ Placement of Employment: _____

Name: _____ / Occupation: _____

Address: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Email: _____

Canadian Citizen ☐ Landed Immigrant ☐ Work Permit: Yes ☐ No ☐ Other: _____

Guardian's Information

Name: _____ Occupation: _____

Street Address: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Email: _____

Canadian Citizen ☐ Landed Immigrant ☐ Work Permit: Yes ☐ No ☐ Other: _____

Proof of Guardianship appointed through BC judicial process required – Documents attached Yes ☐ No ☐

Legal Custody Information: _____

Siblings

Name: _____ Age: _____ School Attending: _____

Name: _____ Age: _____ School Attending: _____

Name: _____ Age: _____ School Attending: _____

Parish Information

Mother – Parish and Religion: _____ **Father** – Parish and Religion: _____

Sacraments received: Baptism _____ First Communion: _____

(Place and Date) Reconciliation: _____ Confirmation: _____

Emergency Contact #1 (Other than parent/guardian):

_____

Home Phone: _____ Mobile Phone: _____

Relationship to Child: _____

Emergency Contact #2 (Other than parent/guardian):

_____

Home Phone: _____ Mobile Phone: _____

Relationship to Child: _____

Allergies: _____

List any life-threatening health conditions:

(diabetes, heart condition, anaphylaxis or severe allergies, asthma, epilepsy, etc.)

_____

_____

Family Doctor: _____ Phone: _____ **Health Care Number:** _____

Medications:

School staff will give or supervise medications under the following conditions.

1. They are required in emergency situations, or
2. They are required for one month or longer and must be given during school hours.

If your child requires assistance or supervision of medications under those conditions, you need to obtain a **"Medication Administration Form"** from school staff and complete it in conjunction with your physician. You must return the signed card along with the prescribed medication before school starts in September. These steps must be followed with authorization from a physician, before medication will be given to your child.

We are a NUT FREE facility:

As each of you are aware when you register your child for school we ask you about your child's health and whether they have any allergies. We have a number of students who have a life-threatening allergies. Some students are allergic to the taste only while others are allergic to the touch as well. If any of these students come into contact with nuts/peanuts they will have trouble breathing within seconds. This can happen even if they eat or touch a very small amount of a product containing nuts/peanuts by accident. To avoid such an emergency, we are asking for your much-needed cooperation.

We recognize that many children love nuts and especially peanut butter. However, it is mandatory that you do not send nut products to school with your child for lunch or snacks. If a child does bring a nut product to school by accident, we will ask that child to eat their snack or lunch in a safe area with a buddy. Please discourage your child from sharing any food, forks, spoons and food containers with the children that have allergies. We encourage all students to get in the habit of washing their hands before and after eating. Hand washing is one of the best preventions. In order to avoid any teasing, we ask that you take time to sit down with your child and discuss the seriousness of these allergies with your child and how each of us must be tolerant and accepting of the safety needs of all the children in the school.

The teachers and I will be discussing the above points with all students and we hope that each of you as parents will reinforce them at home with your child. In addition, the school's health nurse has reviewed the emergency procedures with us. All staff (including supervisors) have been instructed and informed about how to respond to such an emergency one should arise.

1. **SCHOOL ATTENDED** – list the last three schools, starting with the most recent.

SCHOOL	LOCATION	DATE OF ATTENDANCE	HOMEROOM TEACHER

2. Please include with this application a copy of the **most recent progress report** issued by the school presently attending.
   **If answering YES to any questions below, please explain and submit relevant academic/health services reports for your application to be complete. Please sign a Release of Confidential Information form.*

3. In order to provide the necessary support for each student, it is important that the school have a full understanding of the student's needs. Has your child ever had any of the following assessments and/or support?

   ☐ Psycho-educational ☐ Speech and Language ☐ Occupational Therapy ☐ Physiotherapy
   ☐ Behavioural ☐ Counseling ☐ Other
   If yes, please include a copy of the assessment with this application and provide details:

   _____

   _____

4. Has your child received **Learning Assistance** in the last two (2) years? Yes ☐ No ☐
   If yes, please provide details:

   _____

   _____

5. Has your child experienced **behavioural problems** within the school or Daycare setting? Yes ☐ No ☐
   If yes, please provide details:

   _____

   _____

6. Educationally **relevant medical and health information** (if yes to a-c, please explain, see *(note above)

   a. Does your child have a visual or hearing impairment? Yes ☐ No ☐

   _____

   b. Does your child have any identified (suspected) sensory issues? Yes ☐ No ☐

   _____

7. Do you have legal papers for **custody arrangements** are set by the court system? Yes ☐ No ☐

Legal Residency of Parents – Form A

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

1. I am (please check 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 check the appropriate box and attach).
  - ☐ Admission as 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 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)

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

- ☐ Yes
  Residency Address: _____
  _____
- ☐ No, I am not a resident of British Columbia

3. Parent's/Legal Guardian's Name: _____

Parent's/Legal Guardian's Signature: _____

Date: _____

Legal Residency of Parents (deceased) – Form B

To be completed and signed by the student of a knowledgeable adult (one who knew the student's parent(s) and has knowledge of facts respecting their decease and the matters set out in this document.

1. The student's deceased parent(s) was at time of death:

   ☐ A Canadian citizen

   ☐ A landed immigrant

2. The student's deceased parent was at time of death a resident of British Columbia (please check one):

   ☐ Yes
   Residency Address: _____
   _____

   ☐ No, not a resident of British Columbia

Student: _____

Knowledgeable Adult's Name: _____

Knowledgeable Adult's Signature: _____

(Knowledgeable Adult is one who knows the student's parent(s) and has knowledge of the facts respecting their decease and the matters set out in this document.)

Date: _____

the Catholic Independent Schools of Nelson Diocese

PARENTS AND VOLUNTEERS

3030 Family Statement of Commitment

RATIONALE

"Motivated by a Christ-centered vision of humanity and human history, our schools promote the formation of the whole person. Such formation embraces not only intellectual, but also physical, emotional, moral, and spiritual dimensions of human growth. Intellect, emotions, creative ability, and cultural heritage have a place in the life of the schools. Human knowledge and skills are recognized as precious in themselves but find their deepest meaning in God's plan for creation." – from *'Philosophy of Education for Catholic Schools in the Province of BC'*, by the Catholic Bishops of BC. (2005)

POLICY

CISND schools recognize that students may come from family situations that conflict with the moral teachings of the Catholic Church. The personal background of a student is not an absolute obstacle to enrolment in a CISND school. If parents choose a lifestyle directly opposed to the Church's deeply held moral teachings, they should recognize that the school is not the right place for their child since the home and school would be giving contradictory teaching.

The three partners (home, school, parish) in Catholic education must work together to provide an environment where faith and learning go hand in hand leading young people to their fullest development.

All parents/guardians are required to complete a Family Statement of Commitment upon application for their child(ren).

REGULATIONS

The philosophy of CISND expresses the teaching and practice of the Roman Catholic Church and requires acceptance and support of all members of the school community. The parent/guardian is requested to make a commitment to the values and ideals of our school community. Questions or concerns regarding this commitment form are to be directed to the Principal of the school or the School Pastor.

By returning the signed statement with a completed application for registration, the parent/guardian agrees to accept the responsibility of this commitment.

Family Statement of Commitment

1. Parents and guardians agree that they and their families will demonstrate a respectful and sympathetic sensitivity to the aims and nature of the School and to the Roman Catholic beliefs and practices of the School.

2. All students are required to attend and participate in our religious education curricular and co-curricular programs, including liturgical celebrations, retreats, prayers, etc.

3. Parents and guardians are expected to support the teaching on faith and morals in the religious education program.

4. Regular school attendance and full participation in all aspects of the academic program of the School are required of every student. Each student is expected to strive toward the development of his/her full potential.

5. Each family is expected to support and participate in the fund-raising activities of the School.

6. Each student is expected to know and follow school policies on behaviour.

7. Parents and guardians are expected to know and support school policies and procedures. https://www.cisnd.ca/page/policy-manual

8. Parents and guardians agree to accept the responsibility for the cost of tuition, supplies, and other school activities unless alternate arrangements have been made through the School Principal.

9. If applicable, each parent/guardian agrees to:

    a. Provide the school with complete and updated versions of any orders or agreements
        i. Affecting, restricting, or prohibiting a parent/guardian's ability to access the school or a student attending the school; or
        ii. Impacting a parent/guardian's authority over decision-making in relation to a student's education
        iii. Such updates to these orders or agreements are to be given to the school as they occur.
    b. Minimize and avoid any disruption to the School associated with the implementation of those orders or agreements
    c. Comply with the terms of any orders or agreements.

Failure by a parent/guardian to comply with these regulations or the Parent/Guardian Code of Conduct (Policy 3020) may result in the family being removed from the school. I have read and understand the above expectation and commitments, and I/we hereby accept them as stated.

Parent/Guardian Name *(please print)* _____

Signature _____

Date: _____

Date Approved: February 21, 2019
Date(s) Revised: January 2026

FIELD TRIP CONSENT FORM

PARENT/GUARDIAN CONSENT FOR STUDENT TRAVEL

Curricular and extra-curricular field trips are provided by the school as a part of the program to enrich the course of studies through observation of "real world" situations, or as a logical extension of participating in an extra-curricular program provided by the school. Care is taken to assure that a field trip is carried out in a safe manner by requiring the use of duly authorized drivers and means of transportation. Parents will be informed in advance of any field trips that are planned during the year.

The purpose of this form is to request your parental authorization for your child to participate in the local (not overnight) field trips that are planned for your child while they are a student at St. Mary's Catholic Independent School.

No student will be allowed to attend a field trip without the written consent of the parent/guardian. To have your child included in the local field trips that are planned, please complete the form below.

PARENT/GUARDIAN CONSENT:

Consent is given for _____
Name of Student

To participate in the local field trips planned for him/her during their time at St. Mary's Catholic Independent School.

Please indicate any medical condition(s) of your child that the supervising teacher should be aware of when taking your child on a field trip.

_____

_____

I understand that all school rules will apply while students are on field trips and that any field trip will be planned according to the policies of the St. Mary's Catholic Independent School Council and the Catholic Independent Schools of Nelson Diocese.

_____ _____
Date Parent/Guardian Signature

Dear Parents,

In January 2004, the provincial government passed new legislation pertaining to the collection and use of personal information of individuals. This Act is intended to balance privacy rights of individuals with the need for organizations and businesses to hold personal information. St. Mary's Catholic Independent School must comply with these new regulations as it relates to our students and parents.

Enclosed, for your information, is the complete Personal Information Protection Act (PIPA) document for St. Mary's Catholic Independent School, along with the appropriate consent forms for students and parents.

If you wish to provide consent to allow St. Mary's to collect, use, disclose, or store information regarding your child(ren) or yourself in accordance to the PIPA legislation, please complete the two consent forms and return to the school. Families who have not returned the consent forms, will be contacted to confirm that consent will not be given to the school.

If you have any further questions or concerns about this new legislation, please contact me at the school.

Sincerely,

Vanessa Fer
Principal

Catholic Independent Schools of Nelson Diocese

Operating St. Mary's Catholic Independent School in Cranbrook, BC

PERSONAL INFORMATION PRIVACY POLICY FOR PARENTS AND STUDENTS

Child(ren)'s Name(s) _____ _____

_____ _____

1. I consent to having **St. Mary's Catholic Independent School** collect personal information that may include student identification information, birth certificate, legal guardianship, court orders if applicable, parents' work numbers and e-mail address, behavioural, 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 **St. Mary's Catholic Independent School** (1) for the purpose of establishing, maintaining, and terminating the student's or parent's relationship with **St. Mary's Catholic Independent School**, (2) for additional purposes identified when or before personal information is collected, and (3) as otherwise provided in **St. Mary's Catholic Independent 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 **St. Mary's Catholic Independent 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 **St. Mary's Catholic Independent School** *is the* ***school principal*** *and may be reached at (250) 426-5017.*

Initial: _____ Date: _____

2. I consent to having photographs and work samples of my child used by **St. Mary's Catholic Independent School** in the yearbook, newsletters and our closed school Facebook Page.

Initial: _____ Date: _____

3. There are occasions when **St. Mary's Catholic Independent School** would like to have contact with parents to consult them directly about school issues of meetings, or to plan school related activities. **St. Mary's Catholic Independent School** will normally make your name, home address and phone number as well as the child's name and grade available to the Parent Support Group, St. Mary's Catholic Independent School Council, or others responsible for organizing these types of activities. Your personal information will not be disclosed for business or commercial purposes.

Initial: _____ Date: _____

Parent Personal Information

Parent Name(s) _____

_____

1. 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.

Initial: _____ Date: _____

2. Release and Storage of Parent Personal Information

St. Mary's Catholic Independent School acknowledges that there will be no disclosure of personal information to unauthorized personnel or third parties who are not directly involved in school management or the care, supervision and instruction of your child at this school, unless written authorization from a parent or legal guardian is provided to the school. The school will securely store all digital and hard copy parent and student personal information.

Protecting Your Personal Information

St. Mary's Catholic Independent School collects and uses personal information to provide your child with the best possible educational services as outlined in our Mission Statement. The personal information on these forms is required in order to register your child and assist the school in making informed decisions on the suitability and appropriate placement of your child. This information will also allow the school to respond immediately to an emergency. St. Mary's Catholic Independent School commits to using and storing this information responsibly and will not release this information to a third party without your verbal or written consent unless permitted under the PIPA (Personal Information Privacy Act) legislation. If you have any questions about the use, storage or disclosure of personal information, please contact our privacy offer, the school principal.

I/We consent to having St. Mary's Catholic Independent School collect, use, and disclose this personal information as outlined above.

_____

Parent/ Guardian Signature

Authorization to Use Student Photographs

I/We consent to the use of photographs and in school communications, publications, advertising, promotional materials and on the St. Mary's Catholic Independent School website. Yes ☐ No ☐

_____

Parent/ Guardian Signature

Please let us know how you learned about St. Mary's Catholic Independent School. Check all areas that apply.

- ☐ I attended one of the CISND Catholic Schools.
- ☐ I heard about CISND Catholic Schools through my parish/church.
- ☐ A friend attends (or attended) one of the schools.
- ☐ I visited the CISND website.
- ☐ Recommended by friends or family.
- ☐ Other: _____

General Information

All fees must be paid

- **$80/Family Registration fee**
- **Student Activity fee**
- **Capital building fee**
- **First Month's tuition (for new students and grade 7)**

The filing of this application does not mean automatic acceptance. Acceptance is subject to space and availability.
***Fees are non-refundable**

Early withdrawal with less than one full month's notice.
One month's notice is also required if a child is withdrawn from the school. If this notice is not received, an additional month's tuition will be charged. Please note that it is the parent/legal guardian's responsibility to inform the office of any changes to the enclosed information.

Parent/Guardian(s) _____ _____
Signature/Date Signature/Date

Office Use Only

- ☐ Birth Certificate
- ☐ Baptismal Certificate
- ☐ Legal Residency of Parent
- ☐ Family Statement of Commitment
- ☐ PIPA Form
- ☐ Immigration Documents
- ☐ RC Received
- ☐ Registration fee PD
- ☐ Capital building fee PD
- ☐ Activity fee PD
- ☐ First month tuition PD