



Muskoti Elementary School

REGISTRATION FORM

REGISTERING IN: Pre-K (K4) ☐ Kindergarten ☐ Grade 1 ☐ Grade 2 ☐ Grade 3 ☐ School Year: Is your child registered in Cree-Ative Wonders daycare? Yes ☐ No ☐	
Legal Last Name:	
Legal First Name:	
Legal Middle Name:	Home Street Address
Mailing Address:	
Date of Birth:	
Proof of age: Please provide copy of birth	certificate.
Care Card Number:	Is your child immunized? Yes ☐ No ☐
Band Name:	Status Number:
PARENT/GUARDIAN INFORMATIO	N:
Name:	Contact can pick up: Yes
Relationship to child:	Contact lives with student? Yes
Address (if different from the student):	
	Work #:
Email:	
Name:	Contact can pick up: Yes
Relationship to child:	
Address (if different from the student):	
	Work #:
Email:	











Muskoti Elementary School

ALTERNATE CONTACTS: (Other than Parents/Guardians) The following persons are authorized to pick up my child in case of an emergency. Contact 1 _____ Cell #: ____ Work #: ____ Relationship _____ Contact 2 _____ Cell #: ____ Work #: ____ Relationship _____ **STUDENT LEGAL ALERTS -** Court Order on File? Description **STUDENT MEDICAL ALERTS** – Life Threatening? Description **OTHER STUDENT ALERTS -** Health, Family, or Other Information Description **PERMISSIONS:** By my initial and signature, I consent to the following. **PHOTOGRAPHS AND VIDEOS:** I give permission for photographs and videos of my child to be used in any publicity in which the Saulteau first Nations (SFN)/ Muskoti Elementary School (MES) participates (e.g. newsletter, SFN and MES Facebook pages). INITIAL _____ Signature of Parent/Guardian: **CULTURAL EDUCATION:** I give permission for my child to participate in the Muskoti Elementary School's cultural programming. This programming includes local traditional language and practices such as smudging. **INITIAL** FIELDTRIPS AND EXCURSIONS: I give permission for my child to go on excursions with the Saulteau First Nations – Muskoti Elementary School to places of interest that are no more than thirty minutes driving distance from the school. I understand that on planned trips to Chetwynd and the surrounding area, my student will be bussed to and from these places. INITIAL PARENTAL WAIVER FORM: I confirm I am let parent/legal guardian of the child named on this registration form. I do herby give my consent to their participation in the activities of the Muskoti Elementary School. I waive and release all claims for damages, injuries, or losses including loss of personal property against the school. **INITIAL** Signed: Print Name: Date:

MUSK@TI MASKWAK,

Home of the