

Please confirm the following information. Incomplete forms will not be accepted.

| Student's name: | | | |
|---|---|---|--|
| Parent/guardian: Home phone: Cell phone: Work phone: Email: | | Check th family.Check th | is box if you identify as a low-income family. is box if you identify as a single-parent is box for Junior Academy (grades 2 and 3) is box for Senior Academy (grades 4 to 12) |
| Street address | | | |
| | ВС | | |
| City | Province | | Postal Code |
| Emergency contact information fo | or at least t | two other adults y | ou approve to pick up your child for you: |
| Contact Name | | Relationship to student | Number(s) |
| 1. | | | Home: Cell: Work: |
| 2. | | | Home: Cell: Work: |
| Student information: | • | | |
| Data of hinth (Day/Month (Voca) | | | |
| Date of birth (Day/Month/Year): Public Health Number: | | | |
| Grade fall 2023: School attending: | | | |
| Allergies: | School | itteriumg. | |
| Medical or other concerns (ie., b | ehavioura | l): | |
| Current extracurricular activities | (including | any music experie | ence): |
| Language(s) spoken at home: | | | |
| If so, <u>we need to know</u> . We must ensure that v teen/adult who can attend to support your child background check completed and on file with o | we have adequed that the state of the state | ate staffing to support all d be one possible solution tor. Or we might be able | rt(s) to be successful at school? Yes No of our students and your child safely. If you have a on – as long as the adult has an up-to-date criminal to find a qualified volunteer. with BMA as the priority extracurricular? Yes No |