

All fields of information on both pages are requirements for admission.
 As per the Daycare Nursery Act highlighted areas are mandatory.
 Please enter all data as accurately as possible.

APPLICANT'S FAMILY NAME: _____

FATHER/STEPFATHER/GUARDIAN (circle one)

MOTHER/STEPMOTHER/GUARDIAN (circle one)

Name _____
 Surname First

Name _____
 Surname First

Cell Phone # _____

Cell Phone # _____

Home # (if applicable) _____

Home # (if applicable) _____

Home Address _____

Home Address _____

Postal Code

Postal Code

Email address: _____
 (Father/Guardian)

Email address: _____
 (Mother/Guardian)

Employment Address _____

Employment Address _____

Postal Code

Postal Code

Business Phone # _____

Business Phone # _____

If separated or divorced, please indicate court-ordered custody arrangements: _____

Name of Student(s)			
Date of Birth (mm/dd/yy)			
Previous School Attended (Please include full mailing address and telephone number)			
Citizenship			
Permanent Residency Number (if applicable)			

Continue on reverse & following pages...

FOR OFFICE USE ONLY Application rcvd on: _____ Entry date: _____ Discharge date: _____
 Tuition days: 2 3 5 full day / a.m. Registration fee pd: _____ Total: _____ Monthly Amount: _____
 PAP: Y N Comments: _____ House Placement: C. F. M. T
 EI _____ bc _____ med _____ hh form _____ hh on line _____ sof _____ gtkyc _____ db _____ file _____ acc let _____

All new families are asked to complete the following questions:

1. **How did you hear about OCS Preschool? What are the features of our program that brought you to the application stage?**

2. **How will you assist the school in attaining its mission statement: "Nurturing excellence in a Christ-centred academic environment"?**

3. **What are your expectations as you move forward with your child's education? Will you consider continuing with OCS for his/her elementary program?**

4. **Church Attendance:**

Father/Guardian

Mother/Guardian

Do you attend church? _____

Do you attend church? _____

Church Name _____

Church Name _____

City _____

City _____

Denomination _____

Denomination _____

*** Personal Information Consent:** In providing data on this application form I understand that personal information will only be used for the internal purposes of the school and will only be disclosed under conditions outlined in the Oakville Christian School Privacy Policy.

*** Email Consent:** I consent to the use of the email address(es) provided on this application to receive electronic messages from Oakville Christian School, which will include (but not be limited to) newsletters, office memos, and teacher communications. I understand that I will have the option to unsubscribe at any time.

*** I understand that the Registration Fee & Tuition Deposit are non-refundable.**

Signature _____
Father/Guardian

Signature _____
Mother/Guardian