



The future is in our hands.

# TURTLE MOUNTAIN SCHOOL DIVISION

P.O. Box 280 Killarney, Manitoba R0K 1G0  
Office: (204) 523-7531 Fax: (204) 523-7269

## KINDERGARTEN TO GRADE 12 REGISTRATION FORM

This form must be completed and signed by the parent/legal guardian of any student(s) new to Turtle Mountain School Division as required by the Freedom of Information and Protection of Privacy Act

<input type="checkbox"/> Boissevain School	<input type="checkbox"/> Killarney School	<input type="checkbox"/> Wellwood Colony School
<input type="checkbox"/> Can-Am Colony School	<input type="checkbox"/> Mayfair Colony School	
<input type="checkbox"/> Holmfield Colony School	<input type="checkbox"/> Minto School	

APPLICATION DATE (YYYY/MM/DD)	PREVIOUS SCHOOL	GRADE REQUESTED
STUDENT LEGAL LAST NAME	STUDENT LEGAL FIRST NAME	STUDENT LEGAL MIDDLE NAME
PREFERRED LAST NAME	PREFERRED FIRST NAME	GENDER
CONTACT PHONE NUMBER	MHSC NUMBER (6 digit)	PHIN NUMBER (9 digit)
DATE OF BIRTH (YYYY/MM/DD)	DOCTOR	DOCTOR'S PHONE NUMBER
STUDENT STREET ADDRESS:	STUDENT MAILING ADDRESS:	
TOWN:	POSTAL CODE:	
BUS STUDENT: <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES: <input type="checkbox"/> RURAL or <input type="checkbox"/> TOWN	
BUS NUMBER:	SECTION/TOWNSHIP/RANGE:	

Note: If bus transportation is required, please fill in [Transportation Form 6-D](#)

SCHOOL DIVISION IN WHICH PARENT/LEGAL GUARDIAN RESIDES: \_\_\_\_\_

CUSTODY: Both  Mother  Father  Joint (Shared)  Guardian  Child in Care

SPECIAL CUSTODY CIRCUMSTANCES/COURT ORDERS: \_\_\_\_\_

It is the responsibility of the parent/legal guardian to provide appropriate Court Documentation, Child in Care Form, etc. to the school.

COURT DOCUMENTATION FOR LEGAL GUARDIANSHIP  (copy to be placed in cum folder)



For the following, please list all relevant contacts, including parent(s) and/or legal guardians

Contact:	_____	Relationship:	_____	
Address:	_____	Place of Employment:	_____	
Contact Phone #:	_____	Email:	_____	
Work Phone #:	_____	Cell #:	_____	
Has Custody <input type="checkbox"/>	Lives With <input type="checkbox"/>	School Pick-Up <input type="checkbox"/>	Receives Mail <input type="checkbox"/>	Accepts Text Messaging <input type="checkbox"/>

Contact:	_____	Relationship:	_____	
Address:	_____	Place of Employment:	_____	
Contact Phone #:	_____	Email:	_____	
Work Phone #:	_____	Cell #:	_____	
Has Custody <input type="checkbox"/>	Lives With <input type="checkbox"/>	School Pick-Up <input type="checkbox"/>	Receives Mail <input type="checkbox"/>	Accepts Text Messaging <input type="checkbox"/>

Contact:	_____	Relationship:	_____	
Address:	_____	Place of Employment:	_____	
Contact Phone #:	_____	Email:	_____	
Work Phone #:	_____	Cell #:	_____	
Has Custody <input type="checkbox"/>	Lives With <input type="checkbox"/>	School Pick-Up <input type="checkbox"/>	Receives Mail <input type="checkbox"/>	Accepts Text Messaging <input type="checkbox"/>

Contact:	_____	Relationship:	_____	
Address:	_____	Place of Employment:	_____	
Contact Phone #:	_____	Email:	_____	
Work Phone #:	_____	Cell #:	_____	
Has Custody <input type="checkbox"/>	Lives With <input type="checkbox"/>	School Pick-Up <input type="checkbox"/>	Receives Mail <input type="checkbox"/>	Accepts Text Messaging <input type="checkbox"/>



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