



Regina Catholic Schools Ukrainian Program Registration Form and Student Information Sheet 2021-22

St. Matthew School

(Please email your completed forms to Susan Kohuch at s.kohuch@rcsd.ca)

Student Name: _____

Home Address: _____ Postal Code: _____

Home Phone: (306) _____ Cell#: (306) _____

School: _____

Grade: _____ Age: _____ Birthday: _____

Allergies: _____

Mother's Name: _____

Mother's Phone: _____ Mother's Email: _____

Father's Name: _____

Father's Phone: _____ Father's Email: _____

Emergency Contact: _____ Emergency Phone: _____

Preferred Evening: _____ Wednesday (4:30-6:30 p.m.) _____ Thursday (6-8 p.m.)

CONSENT	DESCRIPTION
Regina Catholic Schools/Media	<p>I consent to my child appearing in motion pictures or still photographs being made of my child's/ward's likeness, acts, appearances; and sounds records made of child's/ward's voice, by photographers or other personnel employed by or hired by Regina Catholic Schools for educational, advertising or other such purposes as deemed appropriate by Regina Catholic School Division.</p> <p>I also consent to my child being photographed and video/audio recorded and interviewed by members of the media including newspaper, television, and radio. (please circle one) Yes No</p>

Signature of Parent/Guardian: _____ Date: _____