



The Linden School

""Registration and Student Information Form

Please fill out all sections that apply. If a section does not apply, please check the "N/A" box at the top of the section.

STUDENT NAME: Last	First	Middle	GRADE:
HOME ADDRESS: Street Address		Unit #	
City	Province	Postal Code	
E-MAIL ADDRESS FOR SCHOOL CORRESPONDENCE:			
Please list email address you check most often, as we will use it to send you information, updates, permission forms etc.			
HOME PHONE:		HOME FAX:	
BIRTH DATE (DD/MM/YY):		DATE ENROLLED (DD/MM/YY):	

*BILLING ADDRESS OR SECOND ADDRESS (if different from home address) * (N/A)*

Address:	Unit #:	Name:	
City:	Province:	Postal Code:	Relationship:
CHECK APPLICABLE BOXES:	Home Address	Second Address	
Reports to:			
Bills to:			
School Correspondence to:			
<i>* Please attach a \$25.00 administration fee for sending the above items to your second address.</i>			

PARENT(S) / GUARDIAN(S) INFORMATION

	PARENT/GUARDIAN 1	PARENT/GUARDIAN 2 (N/A)
NAME:		
OCCUPATION:		
BUSINESS ADDRESS:		
#-Street-City-Province		
-Postal Code		
BUSINESS TELEPHONE:		
CELL PHONE:		
FAX:		
E-MAIL:	Home	
	Work	
CUSTODIAL PARENT?:	Yes No	Yes No

PLEASE GO TO NEXT PAGE



PARENT(S) / GUARDIAN(S) INFORMATION (N/A)

	PARENT/GUARDIAN 3	PARENT/GUARDIAN 4
NAME:		
OCCUPATION:		
BUSINESS ADDRESS:		
#-Street-City-Province		
-Postal Code		
BUSINESS TELEPHONE:		
CELL PHONE:		
FAX:		
E-MAIL:	Home: Home	
	Work: Work	
CUSTODIAL PARENT?	Yes No	Yes No

USE OF INFORMATION (P/G = PARENT/GUARDIAN)

	P/G 1	P/G 2 (N/A)	P/G3 (N/A)	P/G 4 (N/A)
Would you like to receive e-mail bulletins, reminders and messages from the school?	Yes No	Yes No	Yes No	Yes No
Would you like to be added to the mailing list for <i>In the Loop</i> , our weekly e-newsletter?	Yes No	Yes No	Yes No	Yes No
May we share your information (name, e-mail address, phone #) with the Linden community (e.g. as part of class phone lists, for use by Class Parents in planning social events)?	Yes No	Yes No	Yes No	Yes No
If we can share your information:				
Which e-mail address would you like shared?	Home Work	Home Work	Home Work	Home Work
Which phone number would you like shared?	Home Work Cell	Home Work Cell	Home Work Cell	Home Work Cell

RESIDENT IN CANADA:	NON-RESIDENT:
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STATUS IN CANADA: CANADIAN CITIZEN STUDENT VISA	NATIVE ANCESTRY OTHER VISA	PERMANENT RESIDENT NO STATUS
IMMIGRATION DATE (DD/MM/YY):	PERMIT NUMBER:	
FIRST LANGUAGE SPOKEN:		

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VOLUNTEERING

We always appreciate parent help in the following areas. Please check all of the areas where you would be willing to assist. We will contact you throughout the year as we need assistance.

ACTIVITY	P/G 1	P/G 2	P/G 3	P/G 4
Programming				
▪ Supervise a class field trip				
▪ Drive for a sports team				
▪ Speak at Career Day or identify potential speakers				
▪ Host grade nine Linden student(s) on Take Your Daughter to Work Day				
▪ Organize Take Your Daughter To Work Day				
▪ Identify potential speakers for events such as Person’s Day or International Women’s Day				
▪ Facilitate educational workshops for your daughter’s class				
▪ Facilitate professional development workshops for the faculty				
Maintenance Work				
▪ Assist with minor repairs and/or building improvement				
▪ Maintain the rooftop and front garden				
▪ Assist with painting in the building or performing wall touch-ups				
Special Events				
▪ Assist with set up or refreshments at Science and Technology Fair and/or Art Show				
▪ Donate food/snacks or drinks to sell at the Science and Technology Fair and/or Art Show				
Public Relations				
• Phone potential parents who are exploring Linden and tell them about your experiences at The Linden School				
▪ Distribute Linden’s communications/marketing material in your neighborhood during the course of the year (i.e. post flyers, place pamphlets at a public facility)				
▪ Serve as a parent representative at Open House events and school fairs				
▪ Assist in locating opportunities for the co-principals or faculty to present in the outside community				
▪ Assist in locating and identifying speakers for special events to raise the school’s profile				
Library Work Group Member				
▪ Assist in maintaining the Nancy Ruth Library (i.e. cataloging, processing returned books, etc.)				
Assist in the Linden Annual Giving Initiative				

STUDENT’S GRANDPARENTS – CONTACT INFORMATION (N/A)

The contact information provided below for a student’s grandparents will allow us to send them copies of our quarterly newsletter, *The Linden Letter*, as well as information regarding our Annual Giving Campaign and invitations to school events.

Please record grandparents living at the same address as one contact.

GRANDPARENT(S) 1	GRANDPARENT(S) 2
NAME:	
ADDRESS:	
HOME PHONE:	
E-MAIL:	

PLEASE GO TO NEXT PAGE

(N/A)

GRANDPARENT(S) 3

GRANDPARENT(S) 4

NAME:

ADDRESS:

HOME PHONE:

E-MAIL:

I have read and understood the school's mission, policies, and procedures as stated in the Linden School Parent or New Parent Handbook. I support the mission of the school and endeavour to work as part of a larger community.

Parent Name:

Date (DD/MM/YY):

YOUR INFORMATION & THE LINDEN SCHOOL'S PRIVACY POLICY

The Linden School is committed to protecting the privacy of all individuals in the Linden community. Information provided by you for communication purposes, such as your name, address, telephone number and e-mail address is protected by The Linden School's privacy policy practices. Personal information on students, parents of students and alumnae, alumnae, staff and faculty, former staff and faculty and friends is gathered through admission and job applications, registration, and updates provided by our community members. This information is used by The Linden School to send you our newsletters, updates, invitations, annual giving requests, and for the purpose of marketing, outreach and individual contact by telephone, e-mail and mail. This information is also used to identify students to the Ministry of Education and the Ministry of Health.

The Linden School maintains confidential and secure databases and files of personal information records on the above-mentioned community members that is either publicly available or provided by you. Only authorized staff have access to this information. Volunteers and staff members may be provided with personal information on specific individuals to assist them with their responsibilities, and are trained to work in accordance with our privacy policy. Student addresses and telephone numbers are only distributed to members of the Linden community with the written permission of the family. Faculty and staff information is never disclosed without their written consent. The Linden School does not share (including selling, renting or trading) any personal information with individuals or organizations outside of the School. When a student or faculty member leaves The Linden School, or when collected information becomes outdated, it is shredded and disposed of.

The Linden School records visits to our website for statistical research purposes only, without recording the identity of the user. We outsource certain services to companies to manage on-line activities for The Linden School, such as on-line giving. These companies offer secure sites. You have the right to view your personal information on file at the school by providing us advanced written notice.

By completing The Linden School's registration and permission forms and entering your signature below, you authorize The Linden School to use this information for the purposes outlined above.

Parent/Guardian Name:

Parent/Guardian Signature:

Date (DD/MM/YY):