

The Linden School  
10 Rosehill Avenue  
Toronto, ON M4T 1G5

# RE-REGISTRATION FORM 2010-2011

*Please complete and return by February 26, 2010  
together with the registration fee of \$1000.00.*

NAME OF STUDENT: \_\_\_\_\_

ADDRESS \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ TELEPHONE \_\_\_\_\_

TO ENTER GRADE \_\_\_\_\_

NAME OF PARENT: \_\_\_\_\_

PARENT BUSINESS TELEPHONE: \_\_\_\_\_

PARENT EMAIL: \_\_\_\_\_

NAME OF PARENT: \_\_\_\_\_

PARENT BUSINESS TELEPHONE: \_\_\_\_\_

PARENT EMAIL: \_\_\_\_\_

\* REGISTER the above student for the year 2010-2011 [ ]

\* DO NOT register the above student for the year 2010-2011 [ ]



**Please note: To hold your daughter's spot for 2010-2011, please submit the registration fee with this form.**

**By signing and returning this form, the undersigned parent/guardian of the registered student agrees to be responsible for paying her fees for the school year, 2010-2011.**

PARENT RESPONSIBLE FOR PAYMENT OF TUITION FEES: \_\_\_\_\_

\_\_\_\_\_  
Date: \_\_\_\_\_

Parent/Guardian Signature