



ST. BERNADETTE ELEMENTARY SCHOOL
APPLICATION FORM
2026-2027

13130 65B Avenue, Surrey, B.C. V3W 9M1 Phone: 604-596-1101 Fax: 604-596-1550 Email: registration@stbernadette.ca

ENROLLING IN GRADE _____

PLEASE FILL OUT ONLINE OR PRINT ALL INFORMATION CLEARLY

APPLICATION FEE (non-refundable) \$100.00

Child's Legal Surname:																							
Child's First and Middle Name(s):					Usual Name:																		
Street Address:				City:		Prov:		Postal Code:															
Home Phone:				Child's Sex:		Male		Female															
Child's Religion:				Child's Date of Birth: YYYY/MM/DD																			
Child's Birthplace: (Province of Canada or Country)						Citizenship:																	
Baptism:		YES		NO		Reconciliation:		YES		NO		Communion:		YES		NO		Confirmation:		YES		NO	
Primary language spoken at home:				ENGLISH				OTHER (Please specify):															
Indicate English Fluency:				FLUENT				GOOD				POOR											
FATHER'S NAME:										MOTHER'S NAME:													
Address & phone# if different from student:										Address & phone# if different from student:													
Father's Citizenship:										Mother's Citizenship:													
Father's Employer:										Mother's Employer:													
Father's Work #:										Mother's Work #:													
Father's Cell #:										Mother's Cell #:													
Father's Religion:										Mother's Religion:													
E-mail Address:										E-mail Address:													
If only one parent is listed, proof of legal guardianship and/or court orders are needed for the application to be processed.																							
If you are not the parent, please state your relationship:																							
Parish you are registered in:										Envelope #:													
Name of Last School Attended:																							
Address:										Phone #:													
Name(s) and Birth dates of pre-school siblings:																							
Are there any health concerns, diagnoses or other medical information the school should be made aware of? Yes No																							
Have you registered at other schools? If yes – which schools?																							
How did you hear about our school? If referred, please state who:																							
(OFFICE USE ONLY-- DATE RECEIVED):										TIME:				CHEQUE#				☐ CASH					
UPON ACCEPTANCE, COPIES OF THE FOLLOWING DOCUMENTS <u>MUST</u> BE PROVIDED																							
Birth Certificate, Immunization Record, Baptismal Certificate (if applicable), Report Card (Gr.1-7 only)																							

By signing this form, you certify all information is true and correct, and consent to having St. Bernadette School collect personal information that may include further student information, birth certificate, legal guardianship, court orders and any similar information needed for application of registration. This information is required in order to apply to register your child and assist the school in making an informed decision as to your child's suitability and appropriate placement in the school. For more information, the privacy manager for St. Bernadette School is Mrs. Lee and may be reached at (604) 596-1101.

A falsified application will not be considered for registration. You will be contacted in December for an interview.

Both parents must sign the application form (except when legal documents state otherwise).

Signature _____ Signature _____ Date _____
(Mother) (Father)