



Application For Admission

Student Name _____
Surname Given Names

Date of Birth _____ **Male** **Female**
Day/Month/Year

Application for grade _____ **for the school year beginning September** _____

If applying for Preschool or Junior Kindergarten, I/We are interested in the:

morning program. afternoon program. full-day program.

I/We are interested in having a place reserved for our child:

on the bus. in the before school program. in the after school program.

Personal Information

Father's Name _____

Home Address _____

City/Province _____ Postal Code _____

Home Phone _____ Cellular Phone _____

Business/Occupation _____

Business Phone _____ Email Address _____

Mother's Name _____

Home Address _____

City/Province _____ Postal Code _____

Home Phone _____ Cellular Phone _____

Business/Occupation _____

Business Phone _____ Email Address _____

Siblings (name, age/grade and current school) _____

School History

Present School _____ **Years Attended** _____

School Address _____

City/Province _____ Postal Code _____

Principal _____ Telephone _____

Teacher(s) _____

Medical History

Physician _____ Telephone _____

Health Card Number _____

Has your child ever had his/her eyes tested by a vision specialist? _____

Has your child ever had his/her hearing tested? _____

Does your child have any specific medical problems? _____

Does your child have any allergies? _____

If yes, please list and briefly explain your child's allergic reactions. _____

Is your child receiving any medication? _____

Reasons?Side effects? _____

Is it necessary for staff to administer this medication? _____

Who may we contact in case of an emergency other than parent/guardian?	
Name _____	Relationship _____
Home Phone _____	Business Phone _____

Student Interests

Please list any hobbies, recreational activities or clubs that your child participates in:

Which are your child's favourite subjects and least favoured subjects?

Is there any other information that you feel we should know about your child?

Additional Information

How did you hear about Meadow Green Academy?

Reason for applying for admission:

I/We have read the Meadow Green Academy student handbook and agree to adhere to all rules, regulations and guidelines mentioned herein. Furthermore, I/we understand that Meadow Green Academy is a Christian school and that all students will participate in religious lessons and/or discussions.

I hereby give permission to have the staff arrange for any emergency medical care, including hospitalization if necessary. In all instances, attempts will be made to contact the parent first. The participant is responsible for his/her medical coverage. I hereby release Meadow Green Academy and its staff from all claims arising from participation in any activity associated with Meadow Green Academy.

I/We acknowledge that the amount of \$1,700.00 is non-refundable.

Signature of Parent/Guardian _____ Date _____

Please enclose the following:

- signed and dated Confidential Academic/Behavioral Assessment
- copy of birth certificate
- copy of immunization record
- final report for the previous year and current report card
- tuition deposit (non-refundable)
- post-dated tuition cheques in accordance with payment plan A or B
- busing, AEA, before and after school post-dated cheques (if applicable)