



## Saturday Credit Program On-Site Registration Form

**Please bring completed application to the Saturday Credit Program on October 26, 2019, to register on site.  
Please note that a minimum enrolment of 25 students is required for courses to run.**

OEN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current High School: (Please print clearly) \_\_\_\_\_

Last Name: (Please print clearly) \_\_\_\_\_

First Name: (Please print clearly) \_\_\_\_\_

Phone No. \_\_\_\_\_ Email Address: \_\_\_\_\_

I would like to take the following credit course:

Language \_\_\_\_\_ Level \_\_\_\_\_ Course Code: \_\_\_\_\_

For students not currently attending a Toronto District School Board school, please provide the following information:

Home Address: \_\_\_\_\_

Health Card Number: \_\_\_\_\_

Emergency Contact: Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

### **PARENTAL PERMISSION (FOR STUDENTS UNDER 18 YEARS OLD)**

I give permission for my son/daughter to attend the above named Continuing Education credit program.

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Contact Number: \_\_\_\_\_

Parent/Guardian's Email: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### **Freedom of Information and Protection of Privacy**

The personal information on this form is collected under the authority of the Municipality of Metropolitan Toronto Act, sections 117-119, and will be used as necessary for the purpose of registering a student in Continuing and International Education credit course and for general administrative purposes, such as class lists, or for purpose such as the allocation of staff resources.