



**Continuing Education Program  
Grade 10 Literacy (non-credit)  
through TR Leger  
Continuing Education Program**



**STUDENT REGISTRATION FORM 2018 - 2019**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Day School Location: \_\_\_\_\_

Student SIS ID #: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Student Address: \_\_\_\_\_  
\_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

I give my approval for my child to be enrolled in this program

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Day School Principal

\_\_\_\_\_  
Date

For Day School Office Use	
<b>Days Course to be Held:</b> <u>Tuesdays &amp; Thursdays</u>	<b>Time:</b> <u>2:30 – 3:30 pm</u>
<b>Session of Dates:</b> <u>Feb. 12, 2019 – Mar. 21, 2019</u> <b>Teacher:</b> TBD <b>Room #:</b> Learning Commons	
<b>Registration forms are to be maintained in a Day School Office for the duration of the course and sent to TR Leger Administrative Centre, 1500 Cumberland Street, Cornwall ON K6J 4K9 at the end of the course.</b>	