



OTTAWA-CARLETON  
DISTRICT SCHOOL BOARD

# INTERNATIONAL LANGUAGES PROGRAM (ELEMENTARY)

## Saturday Program – 2009-2010

### Sept. 12, 2009 – June 19, 2010

Language \_\_\_\_\_

Instructor \_\_\_\_\_ Room \_\_\_\_\_

Location (IL Site) \_\_\_\_\_

FOR OFFICE USE ONLY

Date of Registration \_\_\_\_\_

Yes  No

Beg  Inter  Adv

Returning Student

Language Level

**STUDENT Personal Information**

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First Name, Last Name \_\_\_\_\_

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Student's Address (Apt #, Number and Street) \_\_\_\_\_

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City \_\_\_\_\_ Postal Code \_\_\_\_\_ Home Phone Number \_\_\_\_\_

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Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ M/F \_\_\_\_\_ OHIP \_\_\_\_\_

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Medical Concerns \_\_\_\_\_

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Student's Present Day School \_\_\_\_\_ Grade in September \_\_\_\_\_

Check (x) Board of Education

OCDSB     OCCSB     CEPEO

CECLF     OTHER \_\_\_\_\_

**PARENT(s)/GUARDIAN(s) Information**

**(A)**

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First Name, Last Name \_\_\_\_\_

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Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

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Language spoken at Home \_\_\_\_\_

**(B)**

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First Name, Last Name \_\_\_\_\_

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Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

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Language spoken at Home \_\_\_\_\_

**EMERGENCY CONTACT:**

**(C)**

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First Name, Last Name \_\_\_\_\_

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Home # \_\_\_\_\_ Cell # \_\_\_\_\_

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Language spoken at Home \_\_\_\_\_

### **STUDENT ALLERGY REPORT**

It is very important that we are made aware of any serious allergies your child may have and what can be done in the event of an allergic reactions (other than to call 911)

Allergy: \_\_\_\_\_

Remedy: (e.g. Epi-Pen): \_\_\_\_\_

Doctor's Name/Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian

### **STUDENT PHOTO RELEASE REPORT**

Photos, videos, films or interviews will only be done with the prior knowledge and consent of the school principal or designate and will not be used for commercial gain.

I/we hereby consent to the inclusion of photographs of my/our child in the following:

- class pictures, yearbook, special events/awards, videos and films
- photographs, films or interviews taken by media as part of a school-related activity
- school board publications produced by the Communications Department
- photographs for use on school Internet pages and OCDSB public web sites

I/We hereby consent to the inclusion of any photographs of my/our child

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Date

**\$10 Non-refundable activity fee will be collected on the first day of school**

The International Languages (Elementary) Program is mandated by the Ontario Ministry of Education and Training and is free to students eligible to attend Ontario Schools other than the \$10 activities and consumable learning materials fee that maybe used in instruction. For out of province students, there will be a fee. Please consult the Site Administrator for the amount. Cheque is payable to OCDSB International Languages Program and attached to this registration form.