



Christian Homeschool Academic Ministry Program Society Registration Form (2009-2010)

Return forms to:

E-mail admin@champhomeschool.ca or
mail to #97 52328 Hwy 21, Sherwood Park AB T8B 1J9

www.ChampHomeschool.ca

Family Name _____ Mothers Name: _____, Father: _____

Address _____ City _____ P. Code _____

Phone: _____ Fax: _____ E-Mail: _____

Work/Cell: _____ Work/Cell: _____

Student Name	Grade	Birthday (yr/mo/day)	Sex (M/F)	Program	Language	Language Level	Grade 7+ Options (2 ea)

Legend:
 Program: (F=Full, P=excl language, L=Language only)
 Language: (F=French, G=German, S=Spanish)
 Language Level: (B=Beginner, I=Intermediate)
 Grade 7 and up Option: Please rank as many preferences as you can in order starting with first choice
 1 – Computers, 2 – Esthetics, 3 –Science, 4 – Food Science,
 5 – Music Ensemble (bring your own instrument), 6 – Toastmaster (5 - 7 week session)
 7 - Art (Grade 7 and up); 8 - Sewing (add \$230, max 6 student/class, for grade 5 and up)

Contact CHAMP Administrator for documents if you are missing the documents listed below.

PARENT DECLARATION: I have read, understood, and will abide by CHAMP policies (Program Fees, Waiver, Placement of Students, General Operating Policies, Behavior Policy). If part of a two-parent household, my signature indicates that I have discussed the above with the other parent, and that we are in agreement. By registering their children, parents give permission to CHAMP to take pictures for purposes of advertizing CHAMP and publish names, phone numbers, student level to registered CHAMP families, and share medical information with teachers.

The following must be included with this registration form:

- Emergency Information form for each student.
- Waiver
- Postdated cheques as per fee schedule.
- 3 undated missed duty day cheques.

NOTES: All classes are subject to adequate enrollment, teacher and facility availability.

Parent/Guardian Signature _____ Date _____

13 July 2009