



Quw'utsun Hu-Yi'xwule' Middle School 2021 - 2022 Student Registration

Mail: 5744 Allenby
Road Site: 5594 River Road
Duncan, BC V9L 5J1

Email: Ytt.Reception@cowichantribes.com

Please provide all required information below and ensure it is kept up to date

TODAYS DATE: _____

| | | | |
|------------------------------------|------------------------------|--------------------------------|---------------------------------------|
| OFFICE USE | SCHEDULE FOR TESTING: | Appointment date: _____ | Time: _____ |
| REQUEST FOR STUDENT RECORDS | YES <input type="checkbox"/> | NO <input type="checkbox"/> | FAXED <input type="checkbox"/> |

NAME: _____
LAST FIRST MIDDLE

PARENT/GUARDIAN: _____

ADDRESS: _____ Postal Code: _____

MAILING ADDRESS (if different) _____ ON RESERVE: Yes No

PRIMARY NUMBER: _____ SECONDAY NUMBER: _____

BIRTHDATE: Year/Month/Day _____ Gender: M F Other Email: _____

| | |
|--------------------------------------|--------------------------------------------------------------------------------------------------|
| BAND NAME: _____ | STATUS # _____ |
| Personal Health #: _____ | MEDICAL CONDITIONS or ALLERGIES? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| If yes, please specify: _____ | |

| | | | |
|-----------------------------|---------------------------------------|--|--|
| EMERGENCY CONTACT(S) | | | |
| NAME: _____ | RELATIONSHIP TO STUDENT: _____ | | |
| TELEPHONE # _____ | WORK TELEPHONE# _____ | | |
| NAME: _____ | RELATIONSHIP TO STUDENT: _____ | | |
| TELEPHONE # _____ | WORK TELEPHONE# _____ | | |

Last School Attended: _____ Last Grade Completed: _____

Reason For Leaving: _____

CONSENT TO RELEASE FORM

I give permission to Quw'utsun Hu yi'xwule staff to bring my child to the local hospital IF failed attempts to reach emergency contacts persons. YES NO

I give my child permission to leave school grounds during lunch hour: YES NO

MEDIA RELEASE

We may showcase our school and students at public events or in newspapers, use photos or videos for class room instructional or promotional purposes, etc. We will never sell the photographs or use them to exploit students.

Do you give Yuthuy'Thut/Quw'utsun Hu'yi'xwule' permission to use photos or video recordings of your child?

YES I give permission NO I do not give permission

DUNCAN AREA

The teachers and assistants will be walking with students to various locations within the Duncan area.

Do you give permission for your child to participate in these local field trips? YES NO

ACCESS TO INTERNET

I/WE understand that this Internet access is intended for educational purposes, and that we do not permit access to chat lines, or email during class time.

Students Signature _____ **Date** _____

Parent/Guardian Signature _____ **Date** _____