



**E.D. FEEHAN CATHOLIC HIGH SCHOOL  
REGISTRATION FORM 2021 - 2022**

**Grade:** \_\_\_\_\_

**STUDENT** (*enter name as it appears on your Birth Certificate*) ( ) Female ( ) Male

\_\_\_\_\_ Legal Last Name \_\_\_\_\_ Legal First Name \_\_\_\_\_ Second Name

\_\_\_\_\_ Address \_\_\_\_\_ Postal Code \_\_\_\_\_ Home Telephone Number

Birth Date: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Grade \_\_\_\_\_ Year: \_\_\_\_\_  
Name and Address

Religion: \_\_\_\_\_ Parish/Church Attending: \_\_\_\_\_

**Student Cell Number:** \_\_\_\_\_ **Student e-mail Address:** \_\_\_\_\_

E.D. Feehan has committed to increase First Nation and Metis graduation rates. Your self-declaration will help to achieve this goal by ensuring access to resources for our FNM students to experience greater academic success.

**Voluntary Declaration of Aboriginal Status:**

( ) Does not apply ( ) Métis ( ) Non-Status ( ) Status / Treaty ( ) Inuit Band: \_\_\_\_\_

**Student lives with:** ( ) Both Parents (same residence) ( ) Both Parents (separate residences) ( ) Mother only ( ) Father only  
( ) Other: \_\_\_\_\_

**PARENT / GUARDIAN INFORMATION**

**\*Please include email address**

Mother/Guardian: \_\_\_\_\_  
Family Name First Name

Address same as student's ( ) **OR**

\_\_\_\_\_ Address \_\_\_\_\_ Postal Code

Work Place: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother/Guardian Cell Number: \_\_\_\_\_

**e-mail:** \_\_\_\_\_

**PARENT / GUARDIAN INFORMATION**

**\*Please include email address**

Father/Guardian: \_\_\_\_\_  
Family Name First Name

Address same as student's ( ) **OR**

\_\_\_\_\_ Address \_\_\_\_\_ Postal Code

Work Place: \_\_\_\_\_ Phone: \_\_\_\_\_

Father/Guardian Cell Number: \_\_\_\_\_

**e-mail:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date of Registration:** \_\_\_\_\_

**“I belong to the Feehan Family; who I am makes a difference.”**