



ST. NICHOLAS GREEK SCHOOL

ΕΛΛΗΝΙΚΟ ΣΧΟΛΕΙΟ ΑΓΙΟΥ ΝΙΚΟΛΑΟΥ

3840 Finch Ave..East Toronto On, M1T 3T4 e-mail: stnicholasgrkschool@gmail.com phone: 647 220 8965

Σχολικό Έτος **2023 - 2024**

**ΔΕΛΤΙΟ ΕΓΓΡΑΦΗΣ
 REGISTRATION FORM**

Πρόγραμμα Σαββάτου

Child's Full Name (English)

Date of Birth

M / F

Grade: _____

Ονοματεπώνυμο μαθητή/μαθήτριας: _____

(In Greek)

Most Recent Grade Completed in Greek School: _____

Διεύθυνση Κατοικίας: _____

/ Address

Parent's/Guardian's Name

Parent's/Guardian's Name

Contact Phone No

Contact Phone No

Email address:

Email address:

Consent to Photo/Video Sharing / Release Form

St.Nicholas School will share from time to time photos/videos of students in our School printed and electronic publications and communications, including emails, website, social media (Facebook) and newsletters. Students will be Presented ONLY IN GROUP PHOTOS/VIDEO NO INDIVIDUAL IDENTIFICATION. To consent to participation in photo/video sharing :

Holy Communion during School hours

If you wish that your child receive Holy Communion when Divine Liturgy is taking place during School hours :

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EMERGENCY CONTACT

Emergency Contact's Name

Contact Phone No : _____

Relationship to Child

St. Nicholas Greek School
Ελληνικό Σχολείο Αγίου Νικολάου

MEDICAL INFORMATION FOR CHILD

Student's Physician's Name _____

Phone Number _____

Παρατηρήσεις Γονέα / Parent's Comments:

(Please inform us of any allergies, accommodation required by student, including abilities, interests and exceptionalities. These will be shared with the classroom teacher and held in the Office.)

Παρατηρήσεις Σχολείου / School's Comments/Policies:

Our School is a **NUT/ALLERGY AWARE facility**. The school operates within the Church/Community building, thus there are instances where nuts, sesame and other allergens may be present in the building. During school hours we request that all students refrain from bringing nuts/sesame and other identified allergens into our classroom environment and we will make every effort through our NUT/ALLERGY AWARE program to provide a safe learning environment for all our students.

Electronic device use is not permitted during class time unless specified by teacher. Students found using electronic devices such as iPods, iPhones, cell phones, gaming devices etc. during lessons the device will be confiscated and will be returned at the end of the school day to the parent of the student.

EMERGENCY CONSENT

I authorize all medical and surgical treatment, X-Ray, laboratory, anesthesia and other medical and or hospital procedures as may be performed or prescribed by the attending physician and or/paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

I release St. Nicholas Greek School and its teaching staff from liability of accident during activities related to St. Nicholas Greek School as long as normal safety procedures have been taken.

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REGISTRATION FEES

Registration Fee	+ Book Fee (\$40 standard)	1 st Student	2 nd Student	3 rd Student	4 th Student
\$490	\$40	$\$490 + 40 =$	$\$440 + \$40 =$	$\$390 + \$40 =$	$\text{Free} + \$40 =$
+		\$530	\$480	\$430	\$40

Parent's /Guardian's signature : _____

Date: _____

FOR OFFICE USE ONLY

Total Amount Paid: \$ _____ **# of Students Registered:** _____

Paid:

Cash: **Chq:** **Chq# / Name:** _____

Payment Received by: _____ **Receipt No:** _____ **Date:** _____