

Hillview Shouts! Enrollment Form for Winter 2012

Child's Name _____ Grade _____
Birthday MM ____ DD ____ YY ____ Age _____
Address _____
City _____ Province _____ Zip _____
Telephone Number _____
Alberta Health Care Number _____
Family Physician _____
Medical conditions (ADHD, diabetes, major allergies
etc...) _____

◇ Mother's Name _____
Address _____
Home Telephone _____ Work Telephone _____
Cell Number _____

And/or (please indicate with whom the child lives)

◇ Father's Name _____
Address _____
Home Telephone _____ Work Telephone _____
Cell Number _____

Emergency Contact _____ Telephone _____

To assure a place for your child for the 2012 Winter Term, return this form with an enrollment fee in the amount of \$45 for one child or \$35 per child for families with more than one child enrolled no later than January 28, 2012. For those requesting subsidies, please call the church office at (780) 461-5395

By filling out this registration form, I as the parent/guardian am committed to upholding the vision of Hillview Shouts! Children's Choir as laid out in the information, dates and FAQs sheets.

Signature _____ **Date** _____

Return to:

Hillview Church, 253 Woodvale West Rd NW Edmonton, AB, CA T6L 1E5
Phone: (780) 461-5393 E-Mail: info@hillviewchurch.ca