



**E.D. FEEHAN CATHOLIC HIGH SCHOOL
REGISTRATION FORM 2024 - 2025**

Grade 9

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

Legal Last Name

Legal First Name

Preferred Name

Second Name

Address

Postal Code

Home Telephone Number

Birth Date: Month _____ Day _____ Year _____

Last School Attended: _____ Grade _____ Year: _____

Name and Address

Student Cell Number: _____ **Student e-mail Address:** _____

RELIGION: ☐ Catholic ☐ Non-Catholic (if you have checked Non-Catholic, please proceed with the information below)

NON-CATHOLIC STUDENT DECLARATION OF INTENTION

I wish to have my child/children attend a Catholic school. I intend and desire that my child/children participate in the spiritual formation and atmosphere of the Catholic school. I agree to abide, to the best of my ability, with the vision, mission, and values of the school division, the spirit of the religious education program, and religious celebrations of the school division.

Signature of Parent/Guardian/Caregiver: _____

Voluntary Declaration of Aboriginal Status:

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.

() 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."



E.D. FEEHAN CATHOLIC HIGH SCHOOL

GRADE 9 COURSE SELECTIONS

Select **one** of the following:

☐ **Regular Registration**

English Language Arts 90A
English Language Arts 90B
Social Studies 90
Catholic Studies 90
Mathematics 90A
Mathematics 90B
Science 90
General Practical Arts 90
(Industrial Arts/Home Economics/Health)

Physical Education 90 *yearlong*

Pick **one** of the following:

___ Arts Education 90 *yearlong*
(Art, Music, Drama)

OR

___ Band 90 *yearlong*

Instrument: _____

☐ **miyo mâcihowin
Cultural and Wellness Program**

English Language Arts 90A *
English Language Arts 90B *
Social Studies 90 *
Catholic Studies 90 *
Mathematics 90A
Mathematics 90B
Science 90 *
General Practical Arts 90
(Industrial Arts/Home Economics/Health)

Physical Education 90 *yearlong* *

Cultural Arts 90 *yearlong* *

*In a cohort with a focus on
Indigenous culture and ways of
knowing

Additional Course Offerings:

___ Choral 90 (2 lunch hours a week)

Have you received any of the following supports?:

___ E.A.L. (English as an Additional Language)

___ L.A. Learning Assistance

Other available programs (by recommendation only):

Modified classes

Bridge Math

Focused ELA

Co-taught Math