

E.D. FEEHAN CATHOLIC HIGH SCHOOL REGISTRATION FORM 2025 - 2026

STUDENT (enter name as it appears on your Birth Certificate) () Female () Male			
Legal Last Name	Legal First Name	Preferred Name	Middle Name
Address		Postal Code	Home Telephone Number
Birth Date: Month Day Year			
Last School Attended:Name and A	ddraga		
Current Grade Student Cell Number:			
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:			
PARENT / GUARDIAN INFORMATION *Please include email address		PARENT / GUARDIAN INFORMATION *Please include email address	
Mother/Guardian: Family Name Address same as student's () OR	First Name	Father/Guardian:Family Name Address same as student's () OR	First Name
Address	Postal Code	Address	Postal Code
Work Place: F		Work Place:	Phone:
Mother/Guardian Cell Number:		Father/Guardian Cell Number:	
e-mail:		e-mail:	
Parent/Guardian Signature: Date of Registration:			

"I belong to the Feehan Family; who I am makes a difference."