



**Bishop James Mahoney High School
Registration Form 2026-2027**

Grade _____

STUDENT (Enter your name exactly as it appears on your Birth Certificate)

Last Name _____ First Name _____ Second Name _____

Name by which you are called _____ Male Female Unspecified _____ Student Cell No. _____

Address _____ Postal Code _____ Student's Home Number _____

Student lives with Both Parents (same residence) Both Parents (separate residences) Mother Only Father Only Other _____

Birth: _____ Religion: _____
Month _____ Day _____ Year _____

Last School Attended _____ City _____ Grade _____ Year _____

Bishop James Mahoney uses email and phone to communicate with our families. Please provide your:

Preferred Phone Number _____ Preferred Email Address _____

Bishop James Mahoney 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 First Nation Métis Inuit

MOTHER/GUARDIAN INFORMATION: *Please include e-mail address

Last Name: _____ First Name: _____

Home Address: same as student's OR _____ Postal Code _____

Primary phone: _____ Other: _____ E-mail _____

Work Place _____ Telephone: _____

FATHER/GUARDIAN INFORMATION: *Please include e-mail address

Last Name: _____ First Name: _____

Home Address: same as student's OR _____ Postal Code _____

Primary phone: _____ Other: _____ E-mail _____

Work Place _____ Telephone: _____

EMERGENCY CONTACT INFORMATION (other than Parent or Guardian):

First Emergency Contact Name: _____ Home # _____ Work/Cell # _____

Second Emergency Contact Name: _____ Home # _____ Work/Cell # _____

Medical Information (e.g. allergies, medications, conditions) _____

Date of Registration: _____ Parent/Guardian Signature: _____

OFFICE USE:

Entered in My School Sask

Schedule Entered