E.D. FEEHAN CATHOLIC HIGH SCHOOL
REGISTRATION FORM 2026 - 2027

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 ☐ Other ☐ Non-Catholic (if you have checked Other or 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 First Nation/ 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."