



3Sixty Education - Registration Form

STUDENT CONTACT INFORMATION

First Name Last Name

Address

City/Province Postal Code

Date of Birth
Month Day Year

Check One: Male Female Other: _____

Phone Email

Homeschool

Emergency Contact Phone

Does the student have an Individual Education Plan (IEP)

Yes No

Explanation of IEP (if applicable)

Note: A copy of the IEP must be submitted to the school

Status in Canada

Canadian Citizen Landed Immigrant Student Visa Other

If not a Canadian citizen, specify date of entry to Canada

Month Day Year

Parent 1 Contact Info

Full Name _____
Address _____

Email _____
Home _____
Cell _____

Parent 2 Contact Info

Full Name _____
Address _____

Email _____
Home _____
Cell _____

Student Resides with Parent 1 Parent 2 Both



Registration Form

COURSE SELECTION (PLEASE INDICATE COURSE NAME & COURSE CODE)

- Course 1: _____
- Course 2: _____
- Course 3: _____
- Course 4: _____
- Course 5: _____
- Course 6: _____
- Course 7: _____
- Course 8: _____

PREREQUISITE (administrative use only)

- Course Code: _____
- Course Code: _____
- Course Code: _____
- Course Code: _____
- Course Code: _____
- Course Code: _____
- Course Code: _____
- Course Code: _____

IDENTIFICATION

- Driver's License
- Passport
- Health Card

Registration Form



POLICIES & PROCEDURES

LIABILITY/WAIVER: I understand that 3Sixty Education assumes no responsibility or liability for students' accident or mishap in and outside the school premises. 3Sixty Education will try their best to provide a very safe environment to the students, during their classes at school. However, it is parents'/guardians' responsibility to arrange of insurance coverage for their child. I hereby release, waive, discharge, and covenant not to sue from any and all liability, claims, demands, action and causes of actions whatsoever arising of or related to any loss, damage or injury, including death, that may be sustained by my child, or to any property belonging to me, while my child's duration at or outside 3Sixty Education.

MEDIA AND INTERNET: I do agree to give my consent to my child's photograph and/or video image media release being taken in connection with educational purposes organized by the school. Photographs may be used in school in the normal publicity of good work / promotion of a good school ethos and in media. In relation to the school website, I accept that, if the school considers it appropriate, my child's picture / video may be chosen for inclusion in media publicity and websites. I give my consent for my child's work to be published on the school's website. I grant permission for my child to access the Internet. I understand that Internet access is intended for educational purposes. I also understand that every reasonable precaution has been taken by the school to provide for online safety, but the school cannot be held responsible if pupils access unsuitable websites.

PREREQUISITE POLICY: I acknowledge that enrollment into the course(s) is conditional and the credit will not be granted until and unless a prerequisite is submitted prior to the end of the course.

REFUND POLICY: Refunds will only be processed if requested within 24 hours of registration OR at the discretion of the principal if prior to 24 hours (Note: \$150.00 registration fee is non-refundable and non-negotiable). After the 24 hours mark no refunds will be provided due to the administrative nature that is required to enroll and establish a student record in our school system.

RELEASE OF INFORMATION: I hereby provide my permission and authorization to 3Sixty Education to release, use or disclosure of academic records and personal information for academic or relevant use only. This authorization shall constitute good and sufficient consent for the purpose of clause 4.3 section 1, to the personal information Protection and Electronic Documentation Act, S.C. 2000, c.5 as amended, to the extent that said act applies to the 3Sixty Education. A copy of this Authorization shall be considered as effective as value as original thereof. I agree that the 3Sixty Education may contact my child's home/former school to collect and/or send information for academic purposes.

HEALTH CONCERNS

Does the student have any life-threatening allergies, or any other health concerns the school should be aware of? Has a medical doctor advised your child may require epinephrine, adrenaline, EpiPen or Twinjet for use at school? List the allergies and/or health concerns if applicable _____

I authorize 3Sixty Education to send my child's midterm and/or final marks to OUAC, OCAS, or other academic institutions for academic purposes as required.

After the completion of this form, additional courses that the student enrolls in will be added to page two of this form and student record system in the school.

I declare that the information given in this application is complete and correct to the best of my knowledge. A full list of school policies and procedures is listed on the school website and it is the responsibility of the parent/guardian to read them. Your signature below is an acknowledgement that you have read and fully accept the terms and conditions at 3Sixty Education.

Student Name

Student Signature

Date

Parent Name

Parent Signature

Date