

# Vermilion River CLASS – Registration Form



Name: \_\_\_\_\_ Parent's Name (if registering for a child) \_\_\_\_\_

Phone: \_\_\_\_\_ (hm) \_\_\_\_\_ (cell/wk) Email: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Town Postal Code

Course Name \_\_\_\_\_ Fee \$ \_\_\_\_\_

Course Name \_\_\_\_\_ Fee \$ \_\_\_\_\_

How did you hear about this program?  Flyer  Poster  Social Media  Other \_\_\_\_\_

*The following information is collected for the purpose of reporting to our funder, no names are used when reporting. Please fill out as much of this section as you are comfortable with.*

Gender:  Male  Female  Other  Prefer Not To Disclose Year of Birth: \_\_\_\_\_

**Status:**

- Canadian Citizen  First Nations/ Metis/Inuit  
 Permanent or Temporary Resident / Refugee  Unknown

**Schooling:**

- No schooling  Grades 10-12  Special Education  
 Grades 1-6  Some Post-secondary  Unknown  
 Grades 7-9  Post-secondary Graduate

Will you travel more than 50km one way for this program?  Yes  No

**Do you have problems in any the following areas?**

- Financial (money)  Belonging  Family issues  English Language  
 Childcare  Confidence  Parenting  Housing needs  
 Transportation  Learning  Racism  Food

**Please send me email notices for:**

- Fall & Winter Flyer (sent out twice per year)  Technology / Business classes  
 Art classes  Newcomer information  
 General, Personal Development classes  CLASS Events

**Please read the authorizations below:**

- I authorize CLASS to use names, photos and testimonials of myself and/or my child for awareness and promotion purposes. (social media, displays and newspaper).  
 I authorize CLASS to contact me about the classes I am registered in.

Signature: \_\_\_\_\_

**For Office Use Only:**

Session: \_\_\_\_\_ Paid: \$ \_\_\_\_\_  Cash  Cheque  E-transfer

Date: \_\_\_\_\_ Receipt: # \_\_\_\_\_  Given  Emailed