



# HERITAGE CHRISTIAN SCHOOL

LOCATION: #11-20th Street, Battleford, SK

PHONE: 306-446-3188

CELL: 306-441-0751

P.O. Box 490, Battleford, SK, S0M 0E0

WEBSITE: heritage.livingskysd.ca

E-MAIL: heritage@lskysd.ca

*Fostering Academic Excellence - Developing Christlike Character*

## Registration Package

### 2026-2027 School Year

I would like to register the following children for the 2026/27 school year

Name:	Grade
1. _____	_____
2. _____	_____
3. _____	_____

### Registration Fees

#### 2026-2027 School Year

Grade	Number	Registration Fee	Total
Kindergarten	_____	\$700/year	_____
Gr. 1-3	_____	\$1200/year	_____
Gr. 4-9	_____	\$1300/year	_____

Parent Name(s): \_\_\_\_\_

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

Date: \_\_\_\_\_



# Heritage Christian School

## Registration Form

Battleford, Sask. S0M 0E0 Phone: 306)446-3188

**Kindergartens must be 5 years old before December 31st**

### Student Information (1)

Last Name:	First Name:	Middle Name:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth:	Month      Day      Year _____

### Sibling Information

Last Name	First Name	Grade	School (if different)
Last Name	First Name	Grade	School (if different)
Last Name	First Name	Grade	School (if different)

### Enrollment Information

<input type="checkbox"/> New Student (no previous schooling)	<input type="checkbox"/> Transfer from another SK school	<input type="checkbox"/> Transfer from Home-based in SK
<input type="checkbox"/> Transfer from other Province	<input type="checkbox"/> Transfer from First Nation SK school	<input type="checkbox"/> Transfer from other Country
<input type="checkbox"/> Exchange Student		
Grade:	Grad Year (for grade 10+):	

### Student Personal Information

Physical Address House #      City/Town      Province      Postal Code	Home Phone Number:
Mailing Address Box #      City/Town      Province      Postal Code	Medical Notes:

### Additional Student Information (2)

Previous School Attended & City:
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### Parent/Guardian Information (3)

<b>Parent 1</b> <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Step-Parent			
Last Name		Mailing & Physical Address (if different from student)	
First Name		Primary Contact # (      )	
Lives with Student Yes / No	Receive mail about student Yes / No	Bus. Phone (      )	Employer
		Email Address	



<b>Parent 2</b>				<input type="checkbox"/> <b>Father</b>	<input type="checkbox"/> <b>Mother</b>	<input type="checkbox"/> <b>Guardian</b>	<input type="checkbox"/> <b>Step-Parent</b>
Last Name		Mailing & Physical Address (if different from student)					
First Name		Primary Contact # ( )					
Lives with Student Yes / No	Receive mail about student Yes / No	Bus. Phone ( )		Employer			
		Email Address					
<b>Emergency Contact/Other (please specify-i.e. Billet)</b> _____							
Last Name		Mailing & Physical Address					
First Name		Primary Contact # ( )					

### ***Government (4) and Legal Land Location (4)***

<b>EAL Information</b>	Birth Country	Previous Province (if applicable)
Entry Date to Canada (if applicable) - MM/DD/YY	County of Origin	Previous Country (if applicable)
Entry Date to Canadian School - MM/DD/YY	Citizenship	
First Canadian School	Language at home (1)	
Resident Type (Student's Legal Status) Canadian Citizen    Temporary Resident    Permanent Resident Immigrant Refugee	Language at home (2)	
<b>Legal Land Location:</b> Quarter    Section    Township    Range    Meridian    River Lot		

### ***Students of Native Ancestry (5)***

*Aboriginal people are those who identify themselves to be First Nations (Registered/Treaty/Status Indian, Non-Status Indian), Métis, or Inuit/Inuk. Based on this definition, do you consider yourself to be an Aboriginal person?*

Yes / No

Aboriginal Status	Treaty	Metis	Non-Status Indian	Inuk	Treaty #
Reside on a Reserve:	Yes / No	Reserve Name:			Reserve House #
Band Name:		Band Affiliation Code:			

#### **Office Use Only:**

Cume Date Requested:		
Cume Date Received:		
Other:		





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## Questions for Parents

*Please complete and submit with your registration forms. Please read the current HCS School Handbook and HCS Constitution prior to completing these questions.*

1. Why would you like your child(ren) to take part in a Christian Education?
  
  
  
  
  
  
  
  
  
  
2. What do you desire your child(ren) to experience at Heritage Christian School that they might not experience at a public school or a Catholic school?
  
  
  
  
  
  
  
  
  
  
3. Are you currently attending a local church? If so, which one?
  - b. If you have just moved to the Battlefords, did you attend a church at your previous location? If so, which one and where was it?
  
  
  
  
  
  
  
  
  
  
4. What school (including home school) has your child(ren) most recently attended and in what grade level?
  
  
  
  
  
  
  
  
  
  
5. What do you feel are your child(ren's) strengths as a student?



6. What do you feel are your child(ren's) weaker areas as a student?
  
7. Has/have your child(ren) ever needed the aid of an Educational Assistant to complete schoolwork?
  - b. Has/have your child(ren) ever had a Record of Adaptations (ROA) or an Inclusion and Intervention Plan (IIP) created for them at school?
  
  - c. Has your child been receiving instruction in an English as an Additional Language (EAL) program?
  
8. Does your child(ren) have any allergies or medical needs that the school will need to be aware of?
  
9. Are there any aspects of our Christian educational program that you feel will help reinforce what you are currently doing at home?
  
10. Have you read our current School Handbook and HCS Constitution? If so, are you in full agreement with them (in particular, our statement of faith)?



11. Have you ever made a personal decision to receive Jesus Christ as your personal Lord and Saviour? If so, when and why did you make this decision? Has your spouse? If so, when and why did they make that decision?

Signatures

Parent: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Parent: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_





6. What hobbies do you currently enjoy?

7. What clubs, teams or groups are you involved with outside of school hours?

8. Have you ever made a personal decision to receive Jesus Christ as your personal Lord and Saviour? If so, when and why did you make this decision?

9. How do you personally feel about participating in prayer, devotions, Bible reading and Chapel services during your school day?

Student's Signature: \_\_\_\_\_

