



UMEI CHRISTIAN HIGH SCHOOL
Re-Application for Returning Students

Please review the information needed by the office and make any changes on the form that may be different from last year.

A non-refundable registration fee of \$200 must be received before your application can be processed. This fee will be applied as follows: \$100 for **student fees** (Student parliament, Faith in Action, Athletics, Yearbook), \$100 towards **student account** to be used for fees accumulated through the year such gym uniform or field trips. **Please register by February 28. A late registration fee of \$50 will be applied to applications received after July 31.**

SIGNATURE OF AGREEMENT AND COMMITMENT

To the Student:

Your signature on this form indicates that you are acquainted with the goals and purposes of UMEI and the guidelines we follow to reach these goals as outlined in the UMEI course calendar. **Your signature** shows you intend to take seriously the expectations and responsibilities that UMEI asks of its students. **Your signature** also indicates that you realize that attending UMEI is dependent upon your cooperation.

Student Signature _____ Date _____

To the parent/guardian:

Your signature on this form indicates your support of our program and of your child attending UMEI according to the understandings above. It also indicates your responsibility for payment fees.

Parent/Guardian Signature _____ Date _____

FOR OFFICE USE ONLY: Accepted _____ Not Accepted _____ Acceptance Pending _____

Date form received: _____

A. STUDENT INFORMATION

Name _____ Applying for Grade _____
 First Middle Last

Commonly Used First Name (if different from above) _____ F _____ M _____

Mailing Address:

Street _____ City _____

Province _____ Postal Code _____ Home Phone # _____

Student's Cell # _____

Student's Email _____

B. FAMILY INFORMATION

Father:

Name (first/last) _____ Home Phone # _____

Street/Box # _____ City _____

Province _____ Postal Code _____ Occupation _____

Cell # _____ Business Phone # _____

Email _____

Custodial Parent: _____ **Joint Parent:** _____ **Deceased:** _____

Mother:

Name (first/last) _____ Home Phone # _____

Street/Box # _____ City _____

Province _____ Postal Code _____ Occupation _____

Cell # _____ Business Phone # _____

Email _____

Custodial Parent: _____ **Joint Parent:** _____ **Deceased:** _____