



# FORT LA BOSSE SCHOOL DIVISION

PREPARING STUDENTS FOR THE FUTURE

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## FORT LA BOSSE SCHOOL DIVISION STUDENT REGISTRATION FORM

Name of Student in Full: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

School Previously: \_\_\_\_\_

Address of School: \_\_\_\_\_

Name of Father/Guardian: \_\_\_\_\_

Name of Mother/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Student will register in grade: \_\_\_\_\_

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The above-named student will register at: \_\_\_\_\_

School on: \_\_\_\_\_

Name of Principal: \_\_\_\_\_

School Telephone: \_\_\_\_\_

**If student requires busing, there is a separate form to be completed. Please advise if you require this form.**

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

A copy of this form will be sent to the receiving school and one copy to the student's parent or guardian.

**ANY STUDENT REGISTERING FROM OUT-OF-PROVINCE MUST PROVIDE PROOF OF RED MEASLES IMMUNIZATION WHEN ENROLLING AT THE SCHOOL THE FIRST DAY.**