OUR LADY OF SORROWS SCHOOL



In Faith and Love we build Christian Community

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2022-2023 SCHOOL YEAR NEW STUDENT APPLICATION FORM

(Please print clearly)

CHILD'S SURNAME:	FATHER'S NAME:		MOTHER'S NAME:	
CHILD'S NAME:	BIRTHDATE: (MM/D	D/YYYY)	GRADE:	
	BIRTHDATE: (MM/DD/YYYY)		GRADE:	
	BIRTHDATE: (MM/DD/YYYY)		GRADE:	
FULL ADDRESS:				
Email Address:				
(Print clearly)				
HOME PHONE:	MOTHER'S CEL:		MOTHER'S WORK #:	
FATHER'S WORK #:	FATHER'S CEL:		CHILD	BAPTISED: ☐ Yes ☐ No
RELIGION:	PARISH:			ENVELOPE #:
☐ Catholic				
□ Other				
TEACHER ASSISTANT REQUIRED □ No □ Yes (If yes, please explain)				
PREVIOUS SCHOOL/PRESCHOOL:				
REASON FOR CHOOSING OUR LADY OF SORROWS SCHOOL:				
DATE:		SIGNATURE:		