Lakeview School

18 Lakeview Drive, M'Chigeeng, ON P0P1G0

2026/2027 Registration Form

(Forms with missing or incomplete information will not be accepted)

STUDENT INFORMATION

*** a copy of valid Proof of Age ID and Status Card is required. If child is non-status or lives outside of M'Chigeeng First Nation, a Reciprocal Education Approach (REA) form must also be completed.***

Legal First Name: _____ **Legal Last Name:** _____

Preferred Name: _____ **Gender:** M ☐ F ☐ X ☐

Grade Enrolled: _____ **Birth Date:** _____

Proof of Age: Health Card ☐ Status Card ☐ Birth Certificate ☐

First Nation: _____ **Status Card Number:** _____

Residential Address:

_____
(Apartment Number, Street Number and Name, Town, Province, Postal Code)

Same as Mailing Address? Yes ☐ No☐ (If no, please provide below)

Mailing Address: _____
(PO Box, RR#, Street Number and Name, Town, Province, Postal Code)

Previous School Attended? Yes ☐ No ☐ If yes, include school name: _____

TRANSPORTATION

students must live within M'Chigeeng First Nation to qualify for transportation

Please check the form of transportation required:

Student Requires Bussing ☐ Student Walking ☐ Drop off/Pick up ☐

Is the transportation address the same as above? Yes ☐ No ☐ (If no, please provide)

Address: _____

Parent/Guardian Initial: _____

I, _____, the legal parent/guardian of _____, hereby register this
(parent/guardian's name) (student's name)
student to attend Lakeview School as of _____.
(start date)

I verify that this information is true and accurate to the best of my knowledge.

Parent/Guardian Signature: _____ **Date:** _____

(Please ensure you have provided copies of Proof of Age documentation, Status Card, and Health Card with this registration form, as well as any proof of guardianship, if applicable)

Parent/Guardian Information & Emergency Contacts 2026/2027

This information is crucial and needs to be updated every year. Please fill out completely.

If you are not a parent, proof of guardianship must accompany this form (guardianship letter, custody order, etc.)

PARENT(S)/GUARDIAN(S) INFORMATION

Parent/Guardian 1

Full Legal Name: _____ Relationship to Student: _____

1st Phone #: _____ Home☐ Work☐ Cell☐ 2nd Phone #: _____ Home☐ Work☐ Cell☐

E-mail: _____

Lives with student: Yes ☐ No ☐ (If no, please include address)

Address: _____

Parent/Guardian 2

Full Legal Name: _____ Relationship to Student: _____

1st Phone #: _____ Home☐ Work☐ Cell☐ 2nd Phone #: _____ Home☐ Work☐ Cell☐

E-mail: _____

Lives with student: Yes ☐ No ☐ (If no, please include address)

Address: _____

Custody Arrangements

Parents ☐ Father ☐ Mother ☐ Grandparent(s) ☐

Split Custody ☐ Other ☐ Please specify:

_____

Foster/Kina/CAS ☐ Please specify case worker: _____ Paperwork on file: ☐

EMERGENCY CONTACTS

Emergency Contact 1

Full Legal Name: _____ Relationship to Student: _____

1st Phone #: _____ Home☐ Work☐ Cell☐ 2nd Phone #: _____ Home☐ Work☐ Cell☐

Does this contact have permission to pick up the student? Yes ☐ No ☐

Emergency Contact 2

Full Legal Name: _____ Relationship to Student: _____

1st Phone #: _____ Home☐ Work☐ Cell☐ 2nd Phone #: _____ Home☐ Work☐ Cell☐

Does this contact have permission to pick up the student? Yes ☐ No ☐

Parent/Guardian Signature: _____ **Date:** _____

Required Consents 2026/2027

MEDICAL

*** a copy of a valid Health Card must be submitted with registration form ***

Dr. Name: _____ **Phone #:** _____

Health Card Number: _____

Allergies/Health Conditions? _____

Are any of the above life threatening? Yes ☐ No ☐ If yes, please specify: _____

I, the parent/guardian, give my permission to the school to transport my child to a medical facility in case of an emergency. Yes ☐ No ☐

Parent/Guardian Initial: _____

Photo/Publicity Consent

During the school year, your child's photo may be taken, or comments may be recorded by the school, the Board, and/or the media for promotional purposes. This is an excellent opportunity for your child to represent the school and receive recognition for his/her achievements. Examples of promotional purposes include, but are not limited to, news releases, school and community wide newsletters, brochures, posters, videos, internet information, newspaper coverage, radio broadcasts and television footage. ☐ **Yes, I consent.** ☐ **No, I do not consent.**

Lakeview School Facebook Page/ M'Chigeeng Newsletter

May we post photos of your child on our Lakeview School Facebook Page/ M'Chigeeng Newsletter? (If you do not consent to the above, you may consent to this option)

☐ **Yes, I consent.** ☐ **No, I do not consent.**

Community Field Trip Consent

This is applicable only for all field trips within the community of M'Chigeeng First Nation. Field trips are planned throughout the school year for your child to enhance the curriculum outside of the classroom.

☐ **Yes, I consent.** ☐ **No, I do not consent.**

We will apply spray sunscreen / bug spray to your child when and if needed.

☐ **Yes, I consent.** ☐ **No, I do not consent.**

Parent/Guardian Signature: _____ **Date:** _____

Lakeview School Acknowledgement of Policies

Parent Handbook Acknowledgement

☐ Yes, I have read the Lakeview School Parent Handbook and understand the processes and responsibilities of Lakeview School and the responsibilities as the parent/guardian.

Student Personal Electronic Devices Policy Acknowledgement

☐ Yes, I have read the Lakeview School Student Personal Electronic Devices Policy and understand the processes and responsibilities of Lakeview School and the responsibilities as the parent/guardian.

Student Code of Conduct Policy Acknowledgement

☐ Yes, I have read the Students' Code of Conduct Policy and understand the processes and responsibilities of Lakeview School and the responsibilities as the parent/guardian.

Attendance Policy Acknowledgement

☐ Yes, I have read the Lakeview School Attendance Policy and understand the processes and responsibilities of Lakeview School and the responsibilities as the parent/guardian.

Food Allergies – "No Peanut Policy" Acknowledgement

☐ Yes, I have read the Food Allergies – "No Peanut Policy" processes and procedures and understand the responsibilities of Lakeview School and the responsibilities as the parent/guardian.

Toileting Expectation

☐ Yes, I understand that it is expected that my child is independent in toilet & bathroom routines.

☐ *Please check if you are interested in joining our Caregivers Council (Parent Council) this year.*
☐ *Please check if you are available to volunteer for events throughout the year.*

Parent/Guardian Signature: _____ **Date:** _____