



BISHOP CARROLL HIGH SCHOOL
GRADE 10 / 11 / 12
2018-2019 FORM
NEW TO CALGARY CATHOLIC



Please complete the personal information below. Registration is based on available room and resources. If room and resources permit you will be contacted by the school's registrar to continue the registration process.

STUDENT NAME: _____, _____ Male Female
(Please print) (Last Name) (First Name)
2017-2018 GRADE: _____
BIRTHDATE (MONTH/DAY/YEAR): _____
CURRENT SCHOOL: _____
HOME ADDRESS: _____
HOME PHONE: _____
PARENT CONTACT NAME: _____
PARENT EMAIL: _____

Please attach a copy of ;

- Student's Birth Certificate
- Proof of address
- Report Card and/or Transcript
- Student and/or parent's Catholic or Orthodox Baptismal Certificate
- Student Reflection Component