



Complete and attach this form to registration package. Deliver it to the designated alternative program school. If the alternative program school is full, deliver it by noon of the day before the lottery draw date. Visit the school website for more information.

(Please print)

Next School Year: _____

Student Name: (Last Name, First Name) _____

I am registering my child for: (Program) _____

I have completed **ONE** of the following forms:

- Transfer Request (my child currently attends a CBE school)
- Student Registration Form (my child does not attend a CBE school)

I acknowledge the following:

- I have read and understood the information regarding this alternative program.
- I have attended/plan to attend the information session or have viewed/plan to view the informational presentation.
- I have read and understood the transportation information.
- I understand that if a lottery process is utilized and my child's name is NOT drawn, it is my responsibility to register my child in another school/program.

My child has a sibling who will be in the same school, in the same program, next school year:

- Yes No

I prefer to receive registration notification of any lottery outcome by:

- Canada Post
- Email: _____

Parent/Legal Guardian Signature: _____

Parent/Legal Guardian Name (Print): _____

Date (YYYY/MM/DD): _____

Questions: Contact your current school for further information and assistance. If new to the Calgary Board of Education, contact Learning at 403-817-7600 or learning@cbe.ab.ca.