



CHEK
ACROSS BC

Christian schooling at home.

Re-registration Application

810 Tenth Street
Nelson, BC V1L 3C7
(250) 352-0526 or 1-888-352-CHEK
Fax: (250) 352-0546
www.chekabc.ca

DATE: _____

School Year: 2011 / 2012

PARENTS:

Name _____

Mailing Address _____

Phone Number _____

E – Mail Address _____

STUDENT OR STUDENTS:

Name _____ Going into Grade _____

Name _____ Going into Grade _____

Name _____ Going into Grade _____

Name _____ Going into Grade _____

Name _____ Going into Grade _____

**NOTE: Kindergarten students and those new to the
Program must complete a full Registration Application**

An updated handbook will be sent to you and any further updates will be sent regularly.

Signed: Father _____

Mother _____

Guardian _____

(Typed in names suffice as handwritten signatures)