



The Hamilton-Wentworth District School Board
Ancaster High School
374 Jerseyville Rd. W. Ancaster, L9G 3K8
Telephone: (905) 648-4468 Fax: (905) 648-8228

GRADE 9 REGISTRATION AND OPTION SHEET 2008-2009

LEGAL LAST NAME: _____ FIRST NAME: _____
MIDDLE NAME: _____ PREFERRED NAME: _____
PHONE: _____ BIRTH DATE: Y/M/D/ ____ / ____ / ____ AGE: ____ SEX: F ____ M ____
STREET ADDRESS:
Apt.# _____ No. & Street _____ Town/City _____ Postal Code _____
MAILING ADDRESS (if different from Street Address):

Town/City _____ Postal Code _____
Father's/Guardian's Name: _____ Bus. Phone #: _____
Email Address _____ Cell Phone: _____
Mother's/Guardian's Name: _____ Bus. Phone # _____
Email Address _____ Cell Phone: _____
CUSTODY: Mother Father Both Other With whom do you live? _____
ELEMENTARY SCHOOL (you are currently attending): _____
COUNTRY OF BIRTH _____ If not born in Canada specify Date of Entry into Canada ____ / ____ / ____
YEAR MONTH
CITIZENSHIP _____ LANGUAGE FIRST SPOKEN: _____

EMERGENCY CONTACTS: if parent/guardian cannot be reached
1. Name: _____ Phone #: _____ Relationship _____
2. Name: _____ Phone #: _____ Relationship _____

PHYSICIAN'S Name: _____ Phone #: _____
Ontario Health Card #: _____ Allergies: _____

I certify that I am the parent or legal guardian of the above student.
Print Name: _____ Signature: _____ Date: _____

In accordance with the Municipal Freedom of Information Act, 1989, I consent to have the above student's photo used in board or school publications.
Print Name: _____ Signature: _____ Date: _____

Return this OPTION SHEET and ACTIVITY FEE of \$10 by cheque only – payable to Ancaster High School to the Elementary School Principal

ACTIVITY FEE PAID _____

ANCASTER HIGH SCHOOL

Grade 9 Option Sheet 2008 – 2009

Name: _____ Elementary School: _____
Last *Given*

Secondary School Contact – Mrs. Smith – Head of Student Services

Students in Grade 9 will take 8 courses. There are 6 compulsory courses and 2 optional courses. Students in Grade 9 will choose from Academic, Applied and Open courses.

Please **circle the appropriate code** for each of the following **6 compulsory courses**.

Course	Academic	Applied	Locally Developed Courses	Open	Teacher Recommendation
1. English	ENG1D1	ENG1P1	ENG1L1		1D / 1P / 1L (Please circle one)
2. Mathematics	MPM1D1	MFM1P1	MAT1L1		1D / 1P / 1L (Please circle one)
3. Science	SNC1D1	SNC1P1	SNC1L1		1D / 1P / 1L (Please circle one)
4. French	FSF1D1	FSF1P1			1D/ 1P (Please circle one)
5. Geography	CGC1D1	CGC1P1			1D/ 1P (Please circle one)
6. Healthy Active Living (Physical Education)				PPL1O1F (Female) PPL1O1M (Male) or PAL1O1H (Co-ed Hockey focus) or PAL 1O1C (Co-ed Performance Sport Training)	

NOTE: ONE ARTS CREDIT IS COMPULSORY IN EITHER GRADE 9 OR 10
Circle 2 optional courses from the following list of Open courses

ADA1O1	Drama	BTT1O1	Information & Communication
AVI1O1	Visual Arts		Technology in Business - Computer
AMU1O1	Instrumental Music	TTI1O1	Integrated Technologies
AMV1O1	Vocal Music	HFN101	Food and Nutrition

Choose two alternate courses in order of preference

Alternate Choices 1. _____ 2. _____

Signatures: Parent: _____ Student: _____

Office Use Only:

Elementary Principal's Comments:



Exceptional Student: _____ **Yes Code:** _____
 _____ **No**

Elementary Principal's Signature: _____