

St. James-Assiniboia School Division



Registration Form 2025

Name of Child _____

Birthdate _____

Registered for Kindergarten at _____ School

Parent/Caregiver _____

Address _____

Language Spoken at Home _____

I may be contacted at:

Home _____ Work _____ Cell _____

Email _____

Please return completed registration form to your local elementary school, or email it to literacylinks@sjasd.ca

