Our Lady of Mercy School
7481 10th Avenue
Burnaby, B. C.
V3N 2S1

November 21st, 2025

Dear Parents:

Re: Kindergarten for Siblings for 2026/2027 School Year

If you have a child who would like to attend Kindergarten at Our Lady of Mercy for the 2026/2027 school year, please return the form below to the school office by Friday, November 28th, 2025.

Preference is given to siblings, and we require this form in a timely manner in order to secure your child's spot in Kindergarten.

In order to provide a safe productive learning environment, it is imperative that the pertinent information is disclosed to the school for educational planning purposes. Disclosure of this information **WILL NOT AFFECT** your child's admission.

Kindergarten for Siblings for 2026/2027 School Year
Please return by Friday, November 28th, 2025

Full Name of Child: _____ D.O.B.: _____ Gender: _____
(Printed) (MM/DD/YYYY)

Full Name of Sibling: _____ Current Grade: _____
(Printed)

Full Name of Mother: _____ Full Name of Father: _____
(Printed) (Printed)

Mother's Cell Number: _____ Father's Cell Number:_____

Mother's Email: _____ Father's Email:_____
(Printed) (Printed)

Check all boxes below that pertain to your child or mark N/A if not applicable.

☐ **ESL**

Language Spoken
At Home:_____

☐ **SPECIAL NEEDS** (ie vision, hearing, physical disabilities, autism)

_____

☐ **ALLERGIES** (i.e. nuts, bee stings, etc.)

_____

☐ **MEDICAL ISSUES** (i.e. asthma, diabetes, seizures, etc.)

_____

☐ We understand that our child must be able to dress and undress themselves independently, and must be able to use the bathroom without adult assistance before September. Exceptions will be made on a case by case basis.

Parent Signature: _____ Date: _____