Registration Form





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Web Site: www.alliancesportetudes.ca E-mail: information@alliancesportetudes.ca

ALL INCOMPLETE FORMS WILL BE RETURNED TO THE SENDER

For first-time registration of students WITHOUT A COMMANDITE For FORM from another college, include the following documents :

- Cégep à distance registration form
- Photocopy of transcripts if you have studied outside Québec
- Photocopy of birth certificate or proof of nationality/status
- Complete payment
- · Calendrier sportif

WITH commandite students COMMANDITE FORM, include the following documents :

- Cégep à distance registration form
- Complete payment
- « Calendrier sportif »

| SPORT | DISCIPI | INE |
|-------|---------|-----|
|-------|---------|-----|

(use other form for QJMHL player)

| LANGUAGE OF INSTRUCTION | | We wish to advise you that the information required for the creation and verification of your permanent code will be transmitted to the Ministère Éducation, Enseignement Supérieur et Recherche in accordance with a pre-existing |
|---|-------------------------|--|
| 2. PERMANENT CODE | | agreement with the Commission d'accès à l'information |
| 3. FAMILY NAME | | |
| 4. GIVEN NAME (S | | |
| 5 BIRTH DATE YEAR MONTH DAY | 6. | GENDER - M - F |
| 7. COUNTRY | | |
| 8. NUMBER 9. STREET NAME | | |
| 10. APT | | 12. PROVINCE |
| 13. POSTAL CODE 14. P.O. BOX | 15. POSTAL STATION | |
| 16. CARE OF | | |
| 17. CELLPHONE AREA CODE | 18. PARENTS AREA C | CODE |
| 19. EMAIL (of student. Mandatory) | | |
| 20. FATHER'S FAMILY | | |
| NAME (even if deceased) | NAME (even if deceased) | |
| 21. FATHER'S FIRST NAME | 23. MOTHER'S FIRST NAME | |
| 24. SOCIAL SECURITY NUMBER (mandatory for issuance of tax receipts) | | |

TO BE COMPLETED BY STUDENT CLAIMING A DISABILITY OR LEARNING DISABILITY

In cooperation with the appropriate agencies, Cégep à distance can offer certain options to people with a disability or learning disability. Please indicate the nature of you disability or learning disability and mention this in each subsequent registration (supporting documentation required).

| NATURE | OF | THE | DISABILITY |
|--------|----|-----|------------|

NATUREOF THE LEARNING DISABILITY

Contact Cégep à distance to learn more about the services offered (supporting documentation required).

| CODE PERMANENT | | | | | | DO NOT WRI | ITE IN THE AREAS W | VITH AN OUTLIN | IE |
|--|--|-------------------------|---------------|---|-------------------|---|---|--------------------|----------------|
| 25. CURRENT RESIDENCE | □QUÉBEC | □ ELS | SEWHERE IN | I CANADA I | □ OUTSIDE CANADA | | 27. LEGAL STATUS IN CANADA □ CANADIAN CITIZEN | | |
| 26. BIRTH PLACE | □ QUÉBEC | □ ELS | SEWHERE IN | CANADA - | OUTSIDE CA | | □ FIRST NATIONS, II □ REFUGEE STATUS □ LANDED IMMIGRA □ OTHER | S NT | |
| 28. CITIZENSHIP (If other than | n Canadian) | | | | | | | | |
| 29. FIRST LANGUAGE | | | □ FRENCH | □ El | NGLISH | □ OTHER | | | |
| 30. LANGUAGE MOST COM | MONLY USED | | □ FRENCH | l 🗆 El | NGLISH | □ OTHER | | | |
| 31. MAIN OCCUPATION | | | □ STUDEN | JT 🗆 EI | MPLOYED | □ OTHER | | | |
| 32. HIGHEST LEVEL OF EDU | JCATION COMPLETED |) | □ ELEMEN | TARY 🗆 SI | ECONDARY/T | RADES - C | OLLEGE - UNIVER | RSITY | |
| 33. ARE YOU CURRENTLY I | ENROLLED IN AN EDU | | NAL INSTITU | JTION? | | | | | |
| | □ COLLEGI | E | | AR EDUCATION EDUCATION | | FULL-TIIFULL-TII | | | |
| | | | NAME OF | INSTITUTION _ | | | | | |
| | | | | | | | | | |
| | □ UNIVERS | SITY | | | | □ FULL-TI | ME □ PART-1 | ГІМЕ | |
| □ NO IN WHAT Y | EAR DID YOU FINISH/ | DISCON | TINUE YOUR | STUDIES? | | | | | |
| 34. I WISH TO REGISTER FO | R THE FOLLOWING SE | EMESTE | R | □ F/ | ALL | □ WINTER | R □ SUMME | ER | |
| 35. I WILL BE APPLYING FOR | FINANCIAL AID FOR TI | HE | | □ FA | LL | □ WINTER | R 🗆 I WILL | NOT BE APPLYI | NG |
| 36. DESIRED PROGRAM (or yo | our current college prog | ram) | □ DCS/ | DEC (program r | name) | | | | |
| | | | □ ACS/ | AEC (program r | ame) | | | | |
| | | | | | | | | | |
| Tuition (\$2/h) fees must be inc | | | | | | | | | |
| For a full-time registration (full-applicable. | time <i>Commandite</i> or reg | gistration | to four cours | es or three totall | ing 180 h or m | nore in the same | e semester), only the f | ees related to the | e material are |
| TYPE 37. COURSE CODE | 38. OPTION G | R CF | IS AU | 39.TITLE OI | E COLIRSE | | | 40. COURSE | |
| 37. COUNCE CODE | 30. 01 11010 | | ie ne | 39.11122 01 | COOKSE | | | FEES | |
| | | | | | | | | | |
| | | | | | | | | | |
| , | | | |] | 41 . ASÉ I | FEE PER COUF | RSE (\$30) | | |
| Alliance Sport-Études and Cég two courses at a time. Please | ep à distance recomma contact ASÉ for more in | ind regist formation | ration to | | 42 . APPL | ICATION FEE | \$30 (if applicable) | | |
| 46. METHOD OF PAYMENT | □ 2. CHEQUE | | | J | | CR \$12.50 / sem | | | |
| | 3. CERTIFIED C | HEQUE | | | | | l Student mitted student (without | | |
| Please write your permanent code on the back of your cheque or | □ 4. MONEY ORD | ER | | | | STER FEE \$55 | | | |
| on the back or your cheque or money order and label it to Alliance Sport-Études. 5. VISA 6. MASTERCARD | | | | (Mandatory with or without a commandite) 45. TOTAL (always greater than \$0) | | | | | |
| | o. Where the | | | | | | | | |
| 47. CREDIT CARD NUMBER | | 1 1 | 1 1 | | 1 1 1 | 1 | 48. EXPIRATION | | |
| | | | | | | | | MONTH | YEAR |
| | | | | | | | | | |

^{49.} STUDENT SIGNATURE DATE

* You must choose an option number for the course. Otherwise, Cégep à distance reserves the right to choose on your behalf.





Student-athlete's athletic calendar

Your athletic calendar will be given to your tutor at Cégep à distance

| Family name: | | | | Given nar | ne: | |
|----------------|-----------------------------|----------------|--------------------------|-------------|--------------------|----------|
| Permanent coo | de: | | | | | |
| | | | | | | |
| Phone: | | Email: | | | | |
| Institution/Na | me of College | | | | | |
| C | Cégep à distance o | only | | | | |
| Sport: | | | | | | |
| | • | | | | | |
| | g schedule (exa Monday | mple: from 6 j | pm to 8 pm) Wednesday | | Friday | Cotundov |
| Sunday | Monday | Tuesday | wednesday | Inursday | Friday | Saturday |
| | | | | | | |
| | | | | | | |
| Total number | of hours of train | ing per week. | ho | nure | | |
| | | | | | | |
| | | | | _ | 015 May 18th to 2. | |
| January | February | March | 1 | April | May | June |
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| | <u> </u> | G 4 | 1 | 0.41 | N.T. I | D 1 |
| July | August | Septen | nber | October | November | December |
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| | | | | | | |
| Signature of | student-athlete | <u> </u> | | | Date | |
| 3151141410 01 | | • | | | Butt | |
| | | | Cégep à dis | stance | | |
| | | | | | , | |
| | | | Registration | n date : 20 | // MM DD | |
| | | | | ΥΥ | MIM DD | |
| | | | Authorized | by: | | |