

BERTRUN E. GLAVIN SCHOOL LUNCH PROGRAM
REGISTRATION FORM 2026 / 2027 SCHOOL YEAR

Please return one completed form *per child*, with post-dated cheques, to the office by **September 18/26**.

PLEASE NOTE: This is a supervision program only. Students must bring their own lunch. Food and utensils are not provided, and there is **no microwave** available for use.

***All unpaid fees from the 2025/2026 school year must be **paid in full** before registration for the 2026/2027 school year **will be accepted.** ***

Child's Name _____ Grade in 26 / 27 _____

Address _____

1st Parent / Guardian Name _____

Daytime # _____ Cell # _____

Email _____ (for correspondence)

2nd Parent / Guardian Name _____

Daytime # _____ Cell # _____

Email _____ (for correspondence)

Alternate Emergency Contact (Parents / guardians will be contacted first)

Emergency Contact Name _____

Daytime # _____ Cell # _____

Relationship to child _____

Information the Lunch Program supervisors should be aware of including allergies, health concerns, etc.:

**Please notify the Lunch Program Coordinator immediately if
any of the above information changes at 204-669-1277.**

Registration Options: Full time - the student will be eating lunch at school every day
Part time - the student will be eating lunch at school on a less than full time basis

All children staying in the Lunch Program must be pre-registered, even if only staying once. If your child will be, please complete a Registration Form for each child and register as "Part time".

