



## ***Enrolment Procedures and Checklist***

### **Following documents and fees must be submitted with the admission form:**

- Copy of Birth Certificate**
- Copy of Proof of Citizenship/Landed Immigrant/PR Card *(if applicable)***
- Proof of Residence/Address (parents)**
- Copy of Alberta Health Care Card**
- Immunization Record**
- Completed Registration Package**
- Payments due at time of registration must be included (no exceptions)**
- Payment plan for second installment must be provided at time of registration**



APPLICATION FOR ADMISSION
2024/2025

STUDENT INFORMATION

Student's Legal Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_
First Middle Last

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Registering for grade: \_\_\_\_\_
Month Day Year

Gender: Male [ ] Female [ ] Unspecified [ ]

Citizenship: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Address: \_\_\_\_\_
House Number & Street Name City/Town Province Postal Code

Preferred Phone Number: \_\_\_\_\_ Preferred Email Address: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Grade: \_\_\_\_\_

CONTACT INFORMATION

CONTACT 1 (parent/guardian)

First & last names: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Address: \_\_\_\_\_
House Number & Street Name City/Town Province Postal Code

[ ] Same as above

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Occupation: \_\_\_\_\_

CONTACT 2 (parent/guardian)

First & last names: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Address: \_\_\_\_\_
House Number & Street Name City/Town Province Postal Code

[ ] Same as above

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Occupation: \_\_\_\_\_

Student is living with (check all that apply) [ ] Contact 1 [ ] Contact 2 [ ] Other \_\_\_\_\_

## CUSTODY/GUARDIANSHIP

Are parents:  Separated?  Divorced?  Deceased?

*If school staff is required to enforce a custody or restraining order, a copy **MUST** be submitted to the school.*

## SIBLINGS AT KHALSA SCHOOL

NAME

AGE

GRADE

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## EMERGENCY CONTACT INFORMATION

In the event that the parents/guardians listed as Contact 1 & 2 are unavailable, please provide an emergency contact person.

First & last names: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Address: \_\_\_\_\_  
House Number & Street Name                      City/Town                      Province                      Postal Code

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## MEDICAL INFORMATION

Does your child have any health problems or allergies?      YES / NO

If YES, please specify: \_\_\_\_\_

Does your child require an EpiPen?      YES/NO

Is your child on any routine medication?      YES / NO

If YES, please list: \_\_\_\_\_

\*Note\* If school staff will be required to administer medication, please request the appropriate form from the school office.

Doctor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Alberta Personal Health Card Number: \_\_\_\_\_

In the event that your child needs emergency medical attention, the school will attempt to contact you or your emergency contact. If the school fails to reach either one and your child has to be taken to an emergency clinic, we will do this by ambulance, taxi or staff vehicle at your expense. We will continue to try to reach you or your emergency contact person. Please authorize us to take your child to an emergency clinic, if necessary, by signing the following statement:

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_ authorize the staff at KSC to take my child to an emergency clinic for medical attention when I or my emergency contact cannot be reached.

\_\_\_\_\_  
Parent/Guardian SIGNATURE

\_\_\_\_\_  
DATE

**If the allergy or medical condition noted above is SERIOUS, please complete the Severe Allergy/Medical Condition Alert form.**

## CITIZENSHIP/IMMIGRATION STATUS

CANADIAN CITIZEN: **Yes**  A copy of the student's birth certificate is required.

CANADIAN CITIZEN: **No**  Complete the following section.

BIRTH COUNTRY, IF NOT CANADA:

- Temporary Resident (student has a study permit and living under the care of a legal guardian).  
Non-refundable registration fee and International Fees apply.  
Student Visa Expiry Date: MONTH \_\_\_\_\_ / DAY \_\_\_\_\_ / YEAR \_\_\_\_\_
- A child lawfully admitted to Canada for permanent residence must present a permanent residency card.
- A child living in Canada, with a biological or adopted parent who is a Canadian Citizen.
- A child living in Canada, with a biological or adopted parent who has Landed Immigrant Status or Study Permit or Work Visa.  
Proof of parent's documentation and copy of child's passport required.

## ENGLISH AS A SECOND LANGUAGE (ESL)

A student may be eligible for ESL support when the primary language spoken at home is a language other than English.

Is your child's primary language English?      YES       NO

If No, my child's primary language is: \_\_\_\_\_ Language commonly spoken at home is: \_\_\_\_\_

## ABORIGINAL SELF-IDENTIFICATION

If you wish to declare the student is Aboriginal, please select one:

First Nation (status)	First Nation (non-status)	Metis	Inuit
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For further information, please refer to: [www.education.alberta.ca/system-supports/results-reporting](http://www.education.alberta.ca/system-supports/results-reporting) or contact Alberta Education at 780-427-8501

If you have questions regarding the collection of student information by the school, please contact the office 403-293-7712

## CERTIFICATION

I/We hereby certify that the information provided on this form is true, correct, and complete to the best of my/our knowledge and belief. I/We agree to abide by the policies and regulations of Khalsa School Calgary as set forth by the KSC Board of Trustees and agree to uphold the decisions of the school administration.

This application will not be considered for registration if it is not signed by the legal parents/guardians.

\_\_\_\_\_  
Parent/Guardian NAME

\_\_\_\_\_  
Parent/Guardian SIGNATURE

\_\_\_\_\_  
Parent/Guardian NAME

\_\_\_\_\_  
Parent/Guardian SIGNATURE

\_\_\_\_\_  
DATE



### SEVERE ALLERGY/MEDICAL CONDITION ALERT

The purpose of collecting this information is to respond to potential emergency situations involving your child, whom you have identified having a potentially life-threatening allergy or medical condition. If you have any questions concerning the collection, use or disclosure of this information, please contact the school.

#### STUDENT INFORMATION

Name of Student: \_\_\_\_\_ DOB: \_\_\_\_\_

#### TO BE COMPLETED BY PARENT:

##### A. ALLERGY

This student has a dangerous, life-threatening allergy to the following:

\_\_\_\_\_  
\_\_\_\_\_

Does your child require an EpiPen? YES/NO

If yes, an EpiPen must be kept at school at all times.

##### B. MEDICAL CONDITION

This student has the following medical condition:

\_\_\_\_\_  
\_\_\_\_\_

Medication Required:

TYPE: \_\_\_\_\_

DOSAGE: \_\_\_\_\_

INSTRUCTIONS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Emergency Measures to be followed by the school:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree that Khalsa School Calgary may post my child's picture, administer prescribed medication and/or take the emergency measures required. I acknowledge that this information will be shared, as necessary, with the staff of the school and health care providers.

\_\_\_\_\_  
Parent/Guardian SIGNATURE

\_\_\_\_\_  
DATE



## NOTICE OF ACTIVITIES

(As required by Alberta's Personal Information Protection Act {PIPA})

The purpose of this notice is to inform you about the collection and use of student information by Khalsa School Calgary.

In most cases, the information that we are requesting is required under the School Act. We must provide Alberta Education with specific information on each student. In other instances, the information will be collected and used for activities that will take place throughout the school year. We understand that there may be occasions where you have concerns with how this information will be used. If this is that case, please contact the school and we will discuss your concerns.

The following are examples of how personal information may be used for school related activities. In order to assist the school in maintaining a vital and healthy environment, participation of all students is important and encouraged.

1. The use of a student's name, photograph, or comments about the school in the school newsletter, calendar, or other school publication.
2. The use of student names on art work or other creative work or material displayed at the school or at school sponsored displays within the community.
3. The use of student names for recognition purposes on honor rolls or other awards within the school.
4. The use of student names, telephone number, grade, parent's name and related contact information for absenteeism verification, emergency fan-outs, field trips, and other school sponsored activities.
5. The use of student names, addresses, phone number, parent's name and related contact information for the provision of transportation services.
6. The use of individual, class, or club photos for school purposes, and the use of student photos for student records and other identification purposes.
7. The use of photos/videos of classroom or other school activities by the school where the material will be used within the school.
8. Where individual students are identified or interviewed and the material will be used outside the school, the Media Permission Form will be required.
9. The circulation of information on a "need to know" basis regarding students who have severe or life-threatening conditions.
10. The use of personal information in order to assist individuals who have been contracted to provide ancillary and support services. This may include individuals who provide services through Alberta Government funded projects, such as the Alberta Initiative for School Improvement (AISI).
11. The sharing of personal information with the Board of Trustees, when required.

*I hereby give Khalsa School Calgary permission to use information/photos of my child for all purposes specified above.*

CHILD'S NAME: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian SIGNATURE

\_\_\_\_\_  
DATE



## MEDIA PERMISSION FORM

Throughout the school year photographs and videos of students are produced by the school. When photographs or videos are taken of students where individual students can be identified, the Personal Information Protection Act requires us to obtain your consent where the photographs or videos may be used for purposes outside of the school or at public functions. Such purposes may include brochures, the school website, electronic presentations, social media and other publications illustrating school activities.

By agreeing to this consent form below you are granting permission to Khalsa School Calgary to photograph, and/or videotape your child, display your child's academic and creative work and/or reproduce your child's work for the purposes of promotional material.

By agreeing, you confirm that you understand your child's photograph and/or academic and creative work may be used for, but not limited to, the following:

- Education displays during school open houses, in-service sessions and other school related activities
- At school related activities
- At school sponsored displays in the community
- School publications and promotional material
- School website
- School social media sites (Facebook, Twitter, Instagram, etc.)

In addition, from time to time, schools are visited by members of the media to cover positive events and stories. Their coverage may include photographs, video footage or audio for radio, of students. This coverage may also include interviews with students about a school event, program or activity. These school visits are supervised by school administration and are always pre-arranged.

\*Please note: Photos/videos of school activities (e.g. athletic events, Guru Nanak Dev Ji's Celebration, Nagar Keertan, graduation or other ceremonies) that are open to the general public may be taken and used for purposes within and outside the school. The school is not able to restrict such activity at public events.

**{PLEASE CHECK (√) ONE BOX ONLY}**

- I give permission for my child to be photographed/videotaped and have my child's name used.
- I give permission for my child to be photographed/videotaped, but do not want my child's name used.
- I do not want my child photographed/videotaped and do not want his or her name used.

CHILD'S NAME: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian SIGNATURE

\_\_\_\_\_  
DATE



## TRANSPORTATION REQUEST

**\*\*One form per family\*\***

I request Khalsa School Calgary to provide bus service for the named child/ren for the 2024/2025 school year.  
I am aware that Khalsa School Calgary will contract these services out to Southland Transportation Ltd.

Parents' Names: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**\*Please Note:** The bus company will organize a specific pick up/drop off location for students. There is NO door-to-door service.

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Did your child take the bus last year? YES  NO

If yes, what was the bus number: \_\_\_\_\_ AM Stop Number: \_\_\_\_\_ PM Stop Number: \_\_\_\_\_

Student's Full Name	Grade

Please circle the days and times below.

MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
AM	PM	AM	PM	AM	PM	AM	PM	AM	PM

**\*Please Note:** Southland will arrange for your child (ren) to be picked up and dropped off at a particular location. Service from door to door WILL NOT be provided.

I/we acknowledge that we have read, understood, and agree to the Conditions of Service (attached) and discussed it with my/our child (ren). I/we share Khalsa School's commitment to student safety and conduct and also accept the responsibility of the financial obligations for transportation.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_





**Khalsa School Calgary**

**ਖਾਲਸਾ ਸਕੂਲ ਕੈਲਗਰੀ**

**ALL PAYMENTS ARE NON-REFUNDABLE**

To highlight school *Policy B-5*, the School hereby affirms that:

**"No portion of the fees, paid or due, will be refunded, transferred or cancelled in the event of a student's absence, withdrawal or dismissal from Khalsa School Calgary."**

This protects the school community from financial loss due to late or unexpected withdrawals. There will be an exception made for bus payments if bus service ends up being not available in your area.

Early registration provides the School with student numbers early enough in the year to prepare budgets before the next School year begins. We ask for a financial commitment up front and another deposit in May to make sure we are enrolling students whose parents have determined that this is their School of choice. **Therefore, please be aware of the non-refundable policy in the event you are considering enrolling your child at another institution as well.**

***We ask parents to sign below to acknowledge that you have read and understand the non-refundable policy and that you accept and agree to these conditions.***

Student full name: \_\_\_\_\_

Grade going to: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FEE PAYMENT 2024/2025 SCHOOL YEAR**

**Please complete the following:**

Student Full Name	
Grade Registering In	
Will you require bus services?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**For Office Use Only:**

Method of Payment	
Registration Fee	
Activity Fee	
Bus Fee	



**2024-2025 FEE SCHEDULE**  
**New Student/Students Fee Schedule**

Methods of fee payment are cash, cheque, draft, and credit card (2% fee will be charged for all **credit card** payments). Make all **cheques and drafts** payable to **Khalsa School Calgary** and include 2<sup>nd</sup> payment postdated cheque with admission package.

**Note:** you will be charged **\$20.00** for all **bounced back cheques** so make sure you have enough funds at the cheque due date.

**\*Payments overdue by two weeks or more will result in a \$50.00 late fee charged monthly until the outstanding fee is settled.\***

**Tuition Fee** (Per Year)

Kindergarten (1 <sup>st</sup> Child)	\$3000.00
Grade 1- 9 (1 <sup>st</sup> Child)	\$3500.00
Grade KG-9 (2 <sup>nd</sup> & 3 <sup>rd</sup> Child)	\$2850.00
Grade KG-9 (4 <sup>th</sup> Child)	\$2200.00

**Activity Fee** (Per Year)

Kindergarten to Grade 9	\$225.00 (Per Student)
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**Bus Fee** (Per Year)

Kindergarten to Grade 9	\$1100.00 (Per Student)
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**Fee Payment Schedule**

Fee Type	1 <sup>st</sup> Payment Tuition Fee	1 <sup>st</sup> Payment Activity Fee	1 <sup>st</sup> Payment Bus Fee <small>(If applicable, add to Activity Fee cheque or draft)</small>	2 <sup>nd</sup> Payment Tuition Fee
Due Date	Due with Application	Due with Application	Due with Application	Nov. 1, 2024
<b>Kindergarten</b> (1 <sup>st</sup> Child)	\$1500	\$225	\$1100	\$1500
<b>Grade 1- 9</b> (1 <sup>st</sup> Child)	\$1750	\$225	\$1100	\$1750
<b>Grade KG-9</b> (2 <sup>nd</sup> & 3 <sup>rd</sup> Child)	\$1425	\$225	\$1100	\$1425
<b>Grade KG-9</b> (4 <sup>th</sup> Child)	\$1100	\$225	\$1100	\$1100



## TRANSPORTATION TERMS AND CONDITIONS






- ANNUAL BUS SERVICE FEE IS \$1100.00.
- PAYMENT MUST BE MADE UPON STUDENT REGISTRATION.

### Terms and Conditions of Use:

1. As we are all aware, prices have increased as a result of inflation, including the price of fuel and transportation. In order to best support our families throughout the potential increase in bus fares in the 2024–2025 school year, we are exploring alternative means of support. We advise parents to let their child ride the bus both ways rather than just one way. If we observe a rise in the number of students taking the bus one way, we will need to consider raising the fee for one-way ridership and will have to give those taking the bus both ways priority busing. As you complete the busing form, please bear this in mind.
2. I acknowledge and agree that my child must comply with the policies and procedures of Khalsa School Calgary regarding transportation. Riding privileges may be suspended or cancelled immediately for major safety infractions or after continued disregard for general bus safety rules.
3. I agree to have the student ready by the scheduled departure time and will be on time to pick up my child(ren) on the provided stop time.
4. I agree to give the school written notice if the student does not need bus transportation for the school year.
5. I understand that pick up and drop off times are not guaranteed. Weather and traffic can sometimes cause delays. Parents will be notified if bus service is cancelled for any reason. Parents agree to make arrangements for pick-up and drop-off in this case.
6. I understand that the school has no obligation to provide transportation services to parents.
7. I understand that the transportation fee will only be refunded if the school is not able to accept the application for transportation.
8. I am aware that Southland Transportation creates the bus routes. Southland will plan all pick-up and drop-off locations while prioritizing student safety and ride times. **Not every request for a stop will be granted.** We will not be able to guarantee services for all of our students, even though the routes will be designed to deliver services to the majority of our students. The maximum distance from a dwelling to an authorized bus stop is 2.4 kilometers, according to the Alberta School Act.
9. **I understand any address changes throughout the school year will not guarantee my child's spot on the bus.** The decision will be dependable on the bus capacity. In this situation, your child will be added to a waitlist, and the school will notify parents as soon as a space becomes available.
10. I understand that the school will not be able to confirm transportation for one way riders until mid-September. If space is available, one way riders will be placed on a regular stop, additional stops will not be created.
11. I am aware of and agree that Southland Transportation's regulations and expectations will be followed by the school and the parents. To make sure everyone has a place on the bus and is comfortable, younger students will be seated three to a seat, while older students will be seated two to a seat.
12. **I agree to provide a written doctor's statement outlining any reason why my child(ren) cannot sit with other passengers on the bus.**



Student Name	Grade	Gender	Ph. No.
Address		Email	

Description	Size	Price	Qty	Amount	
Package	Jr.	2 Polo S/S, 2 Polo L/S, 1 Shirt, 3 Pants, 1 Vest 1 Cardigan, 3 Patkas, 1 Tie	<del>\$ 372.78</del>		\$ 354.14
	Sr.	2 Polo S/S, 2 Polo L/S, 1 Shirt, 3 Pants, 1 Vest 1 Cardigan, 3 Patkas, 1 Tie	<del>\$ 386.78</del>		\$ 367.44
Polo Shirt S/S (Color: White)	(3/4) / (4/5) / 6 / 8 / 10 / 12	\$ 24.98			
	14 / 16 / YS / YM / YL	\$ 25.98			
Polo Shirt L/S (Color: White)	(3/4) / (4/5) / 6 / 8 / 10 / 12	\$ 27.98			
	14 / 16 / YS / YM / YL	\$ 28.98			
Formal Shirt (Color: White)	(3/4) / (4/5) / 6 / 8 / 10 / 12	\$ 24.98			
	14 / 16 / YS / YM / YL	\$ 25.98			
 Vest (Color: Navy Blue)	(3/4) / (4/5) / 6 / 8 / 10 / 12	\$ 40.98			
	14 / 16 / YS / YM / YL	\$ 41.98			
 Cardigan (Color: Navy Blue)	(3/4) / (4/5) / 6 / 8 / 10 / 12	\$ 42.98			
	14 / 16 / YS / YM / YL	\$ 43.98			
 Pant Pullups and Half Elastic (Color: Navy Blue)	(3/4) / (4/5) / 6 / 8 / 10 / 12	\$ 40.98			
	14 / 16 / YS / YM / YL	\$ 43.98			
 Patka (Color: Navy Blue)	Circle One (Triangle / String)	\$ 5.00			
 Tie (Color: Navy Blue)	Circle One (Small / Large)	\$ 19.98			

Remark \_\_\_\_\_

### Method of Payment

e Transfer  Cash (Open house Only)

### Terms and Conditions:

- Shipping Charges: \$7.99
- Taxes are excluded

G.S.T. No. 731037529RT0001

Sub Total	<input type="text"/>
H.S.T 5%	<input type="text"/>
Grand Total	<input type="text"/>
Shipping	<input type="text"/>
Paid	<input type="text"/>
Due	<input type="text"/>

Signature

Please note that the applications provided are NOT pdf fillable and that in order to complete qualification for the Bursary, must be presented through the qualifying school and not sent to The Prosser Charitable Foundation directly. Any applications submitted directly by a parent/guardian to The Prosser Charitable Foundation will be automatically disqualified.

### Parent's Choice Bursary Program Application Form

Please see the News/Events page on The Prosser Charitable Foundation website for all current deadline dates.  
www.theprossercharitablefoundation.ca

PLEASE NOTE THAT APPLICATION WILL ONLY BE CONSIDERED IF MADE THROUGH YOUR SCHOOL

Complete a separate application form for each student

New application

Renewal Application

Participating Independent School Name \_\_\_\_\_

Student Legal Surname \_\_\_\_\_

Student Legal Given Names \_\_\_\_\_ SIN \_\_\_\_\_

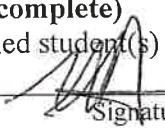
Date first enrolled at This School \_\_\_\_\_ Grade enrolled 2024/25 School Year \_\_\_\_\_

Name of Parent(s) or Guardian \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Telephone Number \_\_\_\_\_ Cell/Mobile Telephone Number \_\_\_\_\_

<b>School Section: (Please have Principal or designate complete)</b>	
Verification of enrollment: I certify that the above-named student(s) are currently registered at the participating school identified above: _____	
 Signature	
Herpinder Kaur Gill	Principal
(Please print) Name	Title
Phone: 403-293-7712 ext. 222	Email happy.gill@khalsaschoolcalgary.ca
Annual Cost of Tuition for Student* _____ 50% of tuition maximum \$4,000	
*Actual net cost of Tuition for this student (Listed tuition less any discounts offered)	

Applications are given the following priorities for funding:

1. Current bursary recipients
2. New students enrolled at participating schools for the first time (those entering the first year offered preferred)
3. All other students.

**Household Information:**

Do any of your children already receive a Parent's Choice Bursary? Yes  No

How many people live in your household?

# of Parents/Guardians	# of Children	# of Other Adults	Total # of People

Estimated total household income for 2024: \_\_\_\_\_

Where did you hear about Parent's Choice? \_\_\_\_\_

**Evidence of financial need must accompany this application**

**Statement of Financial Need:**

I/we have been approved for a government approved low income support program. Common examples of such programs are:

- Calgary Transit Subsidized Transit Pass
- Assured Income for Handicapped Persons Status
- Subsidized rent for city housing or approved housing cooperative

*Please provide a copy of any of the above documents OR  
A copy of The Income Tax Notice of Assessment for the last tax year for each parent (or parent if sole supporter of the child) or guardian of the student bursary applicant.*

**PRIVACY AND CONSENT**

The Prosser Charitable Foundation respects your privacy. For detailed information regarding the Foundation's privacy policy, please contact Ms. Kathy Prosser at tel. 403-244-6808.

- The information that I provided for this application is true, accurate and complete.
- I am aware that providing incomplete or false information will be considered fraud and will affect my ability to access future funding.
- I am aware that the granting of this bursary(s) is subject to conditions listed in my acceptance letter.
- I authorize The Prosser Charitable Foundation to distribute this application to the Selection Committee for review.

I, \_\_\_\_\_, being the parent or guardian of \_\_\_\_\_  
certify that the information contained in the above application is correct:

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_