



REGISTRATION FORM

TFS HIGH SCHOOL

204-5635 Yonge Street, Toronto, ON M2M 3S9

Tel: (416) 850-0649 Direct: (416) 843-3387

info@torontofarsischool.com

FULL TIME STUDENT ☐ OR PART TIME STUDENT ☐

START DATE (YYYY/MM/DD): ____/____/____

STUDENT NAME: _____
LAST NAME FIRST NAME PREFERRED NAME

DATE OF BIRTH (YYYY/MM/DD): ____/____/____ GENDER: FEMALE ☐ MALE ☐

FIRST LANGUAGE OF STUDENT: _____

STUDENT ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

HOME PHONE: _____ CELL: _____

EMAIL ADDRESS: _____

PARENT/GUARDIAN INFORMATION:

NAME: _____ RELATION TO STUDENT: _____

Emergency Contact (Name & Tel) _____

PARENT/GUARDIAN EMAIL: _____

GRADE APPLYING FOR: _____

		SEMESTER	TUITION
1. COURSE TITLE: _____	COURSE CODE: _____	_____	_____
2. COURSE TITLE: _____	COURSE CODE: _____	_____	_____
3. COURSE TITLE: _____	COURSE CODE: _____	_____	_____
4. COURSE TITLE: _____	COURSE CODE: _____	_____	_____
5. COURSE TITLE: _____	COURSE CODE: _____	_____	_____
6. COURSE TITLE: _____	COURSE CODE: _____	_____	_____

ACADEMIC HISTORY:

LAST/CURRENT SCHOOL ATTENDED: _____

DOES THE STUDENT HAVE ANY SPECIAL LEARNING, BEHAVIOURAL OR PHYSICAL DIFFICULTIES?

CITIZENSHIP:

CANADIAN CITIZEN ☐ (New students must provide Canadian birth certificate or citizenship card)

LANDED IMMIGRANT ☐ (New students must provide landing papers/permanent resident card)

VISA STUDENT ☐ VISA EXPIRY DATE _____ PASSPORT # _____

ENROLLMENTN, PAYMENT & REFUND:

- Select your course(s)
- Complete the registration form and submit it with any applicable prerequisite documentation
- Provide payment – Payment Methods: E-transfer via info@tfshighschool.com, debit/credit card, or cash
- Receive your TFS login details
- Get started!

Upon registration, students will have 24/7 access to their online course(s).

Please note that there are no refunds after login information is provided.

Parent/Guardian/Student Name: _____

SIGNATURE: _____

DATE: _____