



# OSSD Credit Courses à la carte

## Reaching Ahead For Extra Credits 2016 Registration Form



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### The Académie de la Capitale Difference

Take advantage of Académie de la Capitale's expertise, approach and rigour to obtain the necessary credits towards your OSSD and most importantly to acquire the in-depth concepts, knowledge and skills to keep on learning and to succeed academically at the post-secondary level.

**Due to our small daytime class sizes, our educators are experienced at one-on-one teaching and differentiated learning. They know how to ensure every student is challenged at his or her level, strengthens core concepts and masters course content.**

With our flexible course start times, we make it possible for you, the student, to reach academic goals at your pace and at your convenience.

Courses are offered year-round, during the school day, after school, in the evening, on the weekend. Courses are offered in an accelerated, semester and/or 10 month academic year format.

### Fees: Session 2016-2017

Private (1) New Credit	Semi-Private (02) New Credit	Semi-Private (03) New Credit	Semi-Private Repeat Credit
\$ 2400	\$ 2000	\$ 1800	\$ 1800

Child's Name \_\_\_\_\_ Sex: M / F

DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Grade: \_\_\_\_ Health Card# \_\_\_\_\_  
Y m d

Parent's Name: \_\_\_\_\_

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

Postal Code \_\_\_\_\_ Email: \_\_\_\_\_

Tel-Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Available Days: ☐ Sun ☐ Mon ☐ Tue ☐ Wed ☐ Thurs ☐ Fri ☐ Sat

Available Times: ☐ Morning ☐ Afternoon ☐ Evening

Preferred Learning Format: ☐ Accelerated (One Month)  
☐ Accelerated (Two Months)  
☐ Semester (Four Months)  
☐ Full Year (10 Months)

Course Name and Grade: \_\_\_\_\_ Course Code: \_\_\_\_\_

Comments: \_\_\_\_\_

Special concerns, health, allergies, behavioural, etc.

### Media Consent

There are times we photograph or videotape the children participating in camp activities. We will publish some of these photos (i.e.: newsletters, website, brochures, newspaper ads, blogs, twitter, etc.), without naming individual campers. Académie de la Capitale/École International Acadecap International School is requesting permission to use photos/videos of your child. Please note that remuneration will not be given for the use of photos/videos.

I give Académie de la Capitale/École International Acadecap International School permission to publish pictures of my child

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_

### Waiver

I hereby release and forever discharge Académie de la Capitale/École International Acadecap International School, its directors, its employees, agents and all persons authorized by it from any claim, damages, action or cause of action or otherwise that may result from either personal injury or property damage suffered by the said child engaging in school activities including field trips provided, however, that the school and its employees and agents exercise reasonable care.

I hereby authorize the Administrators, staff and/or excursion supervisor(s) to act on my behalf as my agent(s) to engage medical attention or hospitalization if required on an emergency basis.

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_



## *Schedule a complementary consultation today*

Parent's First Name: \_\_\_\_\_

Parent's Last Name: \_\_\_\_\_

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

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

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

Contact Number: \_\_\_\_\_

Child Needs/Goals:

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