



School: \_\_\_\_\_

Date of Registration: \_\_\_\_\_  
Month / Day / Year

Registering for Grade: \_\_\_\_\_

ASN: \_\_\_\_\_

**For Office Use Only**

### Notice to Parent or Guardian of Religious Permeation:

The *Alberta Human Rights Act* requires East Central AB Catholic Schools to give notice to a parent or guardian when courses of study, educational programs, institutional materials, instruction or exercises include subject matter that deals primarily and explicitly with religion.

The essential purpose of our schools is to fully permeate Catholic theology, philosophy, practices and beliefs, the principles of the Gospel and teachings of the Catholic Church, in all aspects of school life, including in the curriculum of every subject taught, both in and outside of formal religion classes, celebrations and exercises. Every course of study and education program, all institutional materials, instruction and exercises will at all times include subject matter that deals primarily and explicitly with religion.

### Student Information:

**Legal Verification:** We require a copy of a legal document that provides proof of legal name, age and citizenship or immigration status. Any of the following documents are acceptable to copy: Canadian birth certificate, adoption papers, permanent resident card, student study permit, parent work permit or parent study permit.

Write the student's legal surname (last name) and given names below. These are the names on the student's birth certificate, adoption papers or other legal documents listed above. If the student uses a different first or last name, there is space at the end of this section (preferred names).

Student's Legal Last Name: _____		Students Legal First Name: _____		Student's Legal Middle Name: _____	
Gender:	Grade: _____	Birth Date:	Student's Birth Country: _____		
Male <input type="checkbox"/>		Month/Day/Year			
Female <input type="checkbox"/>			Birth Certificate Enclosed: <input type="checkbox"/>		
X - Unspecified <input type="checkbox"/>					
Home Address: _____			Mailing Address: _____		
City: _____		Province: _____		Postal Code: _____	
Legal Land Description (Rural students): _____ <div style="display: flex; justify-content: space-around; font-size: small;"> <span>¼</span> <span>Sec.</span> <span>Twp.</span> <span>Rge.</span> <span>W M</span> </div>					
Home Phone: _____		Unlisted: _____		Student's Cell Phone: _____	
Student Email (optional): _____					
Also known as (A.K.A) last name: _____			Also known as (A.K.A) first name: _____		
Religion: _____			Parish: _____		

**Information for Sacramental Preparation:** Is your child baptized in the Catholic Faith?  Yes  No

Has your child been confirmed?  Yes  No      Has your child received First Communion?  Yes  No

To assist our Catholic parish with sacramental preparation, do you consent to the district sharing your child's sacramental preparation information with the school's local Catholic Parish?  Yes  No

### If Religion is other than Catholic faith, please sign the following acknowledgment:

I hereby acknowledge and accept the values and philosophy of a Catholic school and that my child will participate in the prayer life, church and church related activities, religious courses, instruction and exercises in which Catholic ethical and moral standards are taught. Additionally, I am aware that my child is being admitted to this school as a non-resident student, and because of this, the District accepts the responsibility of my child's education until such time as my child finishes their program in this school, voluntarily withdraws, or is expelled from the district.

**Parent/Guardian Signature:** \_\_\_\_\_

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

**School History**

Please indicate if the student has ever been registered in Alberta Schools:

- Yes – Name of the last school attended: \_\_\_\_\_
- No – Name, address, city and country of the last school attended: \_\_\_\_\_

**English as a Second Language (ESL) Eligibility**

ESL Students can be Canadian-born or Foreign-born.

My child is:  Canadian Born or  Foreign Born Birth Country: \_\_\_\_\_

Student’s first language learned (specify): \_\_\_\_\_

Student’s primary home language (specify): \_\_\_\_\_

**Citizenship or Immigrant Status:**

**A copy of the following was provided to the school:**

- Canadian Citizen
- Permanent Resident
- Student Authorization – Study Permit (Parent/Guardian Residing in another country)
- Child of a Canadian Citizen
- Child of an individual who is lawfully admitted to Canada for permanent or temporary residence (does not include tourists or visitors)

- Canadian Adoption Certificate
- Canadian Birth Certificate
- Canadian Citizen Papers
- Permanent Resident Card/Landing Form
- Work Permit
- Study Permit
- Refugee Protection Claimant Form

Client ID# _____
Visa # _____
Expiry Date: _____
Date of Arrival in Canada: _____

**Medical Information (Optional)**

You do not have to provide information about medical concerns, but the information could be crucial to the well-being of the student. Are there any serious medical conditions you would like the school to be aware of that affect the student? Please indicate below:

- Diabetes
- Epilepsy
- Allergies
- Hemophilia
- Heart Condition
- Asthma
- Other

Medical Notes: \_\_\_\_\_

**Parent or Guardian Information**

The *Education Act* defines a parent as a legal guardian of the child. Legal Guardianship is legally defined in section 20 of the *Family Law Act*, Part 1 Division 5 of the *Child, Youth and Family Enhancement Act* or Section 23 of the *Family Law Act*. Legal Guardianship may also be established by a temporary or permanent guardianship order under the Child Welfare Act, or by way of a court order or agreement in accordance with the Family Law Act. Please identify the legal guardians of the child being enrolled. If there are questions as to whether an individual is a parent or guardian pursuant to the legal definitions, please contact the school principal for assistance.

With respect to each parent/guardian, please indicate whether the parent/guardian is Catholic. Residency of a student in the District is, in certain circumstances, based upon the faith of the parent/guardian.

<b>Parent 1 Information</b>		<input type="checkbox"/> Parent	<input type="checkbox"/> Guardian	<input type="checkbox"/> Child resides with this person	<input type="checkbox"/> Parent is responsible for student
Relationship to Student:		<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Other (Please Specify): _____	
Last Name: _____		First Name: _____			
Contact information of this Parent or Guardian (if different from student’s):					
Address: _____					
City: _____		Province: _____		Postal Code: _____	
Home Phone: _____			Cell Phone: _____		
Other Phone: _____			Email: _____		
Religious Declaration:		<input type="checkbox"/> Catholic	<input type="checkbox"/> Other		

**Parent 2 Information**     Parent     Guardian     Child resides with this person     Parent is responsible for student

Relationship to Student:     Father     Mother     Other (Please Specify): \_\_\_\_\_

Last Name: \_\_\_\_\_    First Name: \_\_\_\_\_

Contact information of this Parent or Guardian (if different from student's):

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

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

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

Other Phone: \_\_\_\_\_    Email: \_\_\_\_\_

Religious Declaration:     Catholic     Other

**Emergency Contacts**

An "emergency contact person" is someone other than the student's parent(s) or guardian(s).

Name of Emergency Contact #1: \_\_\_\_\_    Relationship: \_\_\_\_\_

Day Telephone: \_\_\_\_\_

Name of Emergency Contact #2: \_\_\_\_\_    Relationship: \_\_\_\_\_

Day Telephone: \_\_\_\_\_

\*\*Please note if Babysitter or Daycare is different than Emergency Contact # please provide it below:

Name: \_\_\_\_\_    Telephone: \_\_\_\_\_

**Guardianship, Custody or Access Rights**

Guardians of the student must be identified to ensure each party's rights are respected. If an order exists affecting guardianship rights or custody or access rights, a copy of the order will be required to be placed in the student record. In rare instances a child may be designated as "protected" if a court issues a restraining order under the *Child, Youth and Family Enhancement Act*, the *Family Law Act*, the *Young Offenders Act* or similar legislation.

Please indicate if any such document(s) exists     No     Yes → A copy is in the student's file and is the following type of legal documentation:  
 Access and/or Custody     Parenting     Guardianship     Protection

**Sibling Information (optional)**

Note: The provision of sibling information is optional and is collected for communication and planning purposes.

Do you have other children attending or will be attending this school District?     Yes (please list)     No

Name	Age	Name:	Age:
_____	_____	_____	_____

**Program**

Does your child have any special needs that we need to be aware of?     Yes     No

**Independent Student Status**

- 6(1) In determining whether a student is living independently for the purposes of this Act, a board may consider the following:
- (a) Whether the student or the student's parent has made a statement in writing indicating that the student is living independently;
  - (b) The student's living arrangements;
  - (c) Whether the student is financially independent or contributes financially to his or her maintenance;
  - (d) Whether the student is responsible for the making of significant decisions regarding matters such as health care;
  - (e) Any other factor the board considers relevant.

(2) Notwithstanding any other provisions in the Act, an independent student is entitled to exercise all the rights and powers and receive all the benefits and is subject to all the obligations under this Act that the student's parent would be entitled to exercise or receive or would be subject to, and the student's parent shall not exercise those rights, receive those benefits or the subject to those obligations.

Are you claiming status as an "Independent Student" under the definition of the Education Act?     Yes     No

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

## Section 23 Eligibility French First Language (Francophone) Education

According to Section 23 of the *Canadian Charter of Rights and Freedoms*, a parent who is a Canadian Citizen has the right to have his/her children receive primary and secondary instruction in French if:

- Either parent's first language learned and still understood is French; or
- Either parent has received their own primary school instruction in Canada in French; or
- Any child in the same family has received or is receiving primary or secondary school instruction in French in Canada,

In Alberta, parents can only exercise this right by enrolling their child in a **French First Language (Francophone)** program offered by a Francophone Regional authority.

Section 23 of the *Canadian Charter of Rights and Freedoms* does not apply to French Immersion programs.

1. According to the criteria set out in the *Canadian Charter of Rights and Freedoms*, are you as the parent eligible to have your child receive a French first language (Francophone) education?

Yes       No       Do not Know

2. If yes, do you as the parent wish to exercise your right to have your child receive a French first language (Francophone) education?

Yes       No

If you claim an entitlement to a Francophone education under these terms East Central AB Catholic Schools may be required to release personal information provided on this form to the local Francophone Education Board upon written request of that jurisdiction.

### Aboriginal Self-identification:

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

First Nation (status)       First Nation (non—status)       Métis       Inuit

Alberta Education is collecting this personal information pursuant to section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act as the information relates directly to and is necessary to meet its mandate and responsibilities to measure system effectiveness over time and develop policies, programs and services to improve Aboriginal learner success. Alberta school boards are also collecting this information pursuant to the same section in conjunction with section 2(1)(t) of the Student Record Regulation and for the same purposes. This information will also be used to determine the provincial First Nations, Métis and Inuit Funding Allocation provided to school authorities.

For further information or if you have questions regarding the collection activity, please contact the office of the Director, Aboriginal Policy, Strategic Services Division, Alberta Education, 10155 – 102 Street, Edmonton, AB T5J 4L5, (780) 427-8501. If you have questions regarding the collection activity by East Central AB Catholic School Board, please contact the East Central AB Catholic School Board Superintendent at (780) 842-3992.

### Consent to Communicate Through Electronic Means

Under *Canadian Anti-Spam Legislation*, we need to establish consent to use your email address provided below for the purposes of communicating with you. We use email addresses to contact you regarding your child's attendance and progress. We will also send your email address an invitation to subscribe to school announcements. For more information about the Canadian Anti-Spam Legislation please visit [www.fightspam.gc.ca](http://www.fightspam.gc.ca).

Do you provide consent for us to contact you for the purposes listed above?

Parent/Guardian 1 Yes  No  Parent/Guardian 2 Yes  No

\_\_\_\_\_  
Email Address (please print)

\_\_\_\_\_  
Email Address (please print)

**I hereby certify the above information to be true, correct, and complete. I have also identified all guardians for this student.**

Print Name: \_\_\_\_\_

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

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

**(This registration document must be dated and signed by the parent, guardian or independent student)**

#### Collection and Use of Personal Information Disclaimer

The information collected on this form is required to allow ECACS to fulfill its obligations under the *Education Act*, the Regulations, and through the *Charter of Rights and Freedoms*. These obligations are to provide a safe and secure environment, protect the student's rights and determine eligibility for particular programs and funding. The information will be made available to employees of East Central Alberta Catholic Separate School Division, its authorized agents, and the Board of Trustees, within the scope of their roles and responsibilities, and to individuals working with the students in schools and to Alberta Education on a need to know basis. The information will be used for authorized programs and activities that are a part of normal school life.

If you have any questions or concerns regarding the collection or intended uses of this information please contact the school principal.



**East Central Alberta Catholic Schools**  
**FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY (FOIPP) ACT**  
 PARENT/GUARDIAN CONSENT FORM

**Student Name:** \_\_\_\_\_

The personal information collected on this form is part of the Division registration process and is authorized under the provisions of the School Act and its regulations and under Section 33(c) of the FOIP Act. All personal information collected during the registration process and during the course of the school year will be used to provide and educational program and ensure a safe and secure environment. If you have any questions or concerns regarding the collection or intended use of this information, please contact the FOIP Coordinator at ECACS Office at 780-842-3992.

**It is important to understand that school events which are open to the public are not subject to the conditions of the FOIP Act. These events may include general assemblies, concerts, school plays, special activities, academic-focused activities and athletics. The general public, parents and media may be in attendance and are allowed to take photographs, create video and audio recordings, and conduct interviews, without first obtaining consent. (It is not expected that the general public or parents will conduct interviews.) The media are expected to work cooperatively with schools within the realm of mutually agreed upon guidelines and protocol.**

Throughout the school year, there will be opportunities for television, radio, newspaper, community organizations, and Division representatives to be invited into the school to provide outside coverage of events and programs not included in the general public category described above. Also, throughout the year, there may be opportunities to display your son/daughter's work or other forms of school work at locations outside of the school. There may also be educational activities where your son/ daughter's schoolwork may be hosted or displayed online via a website or social media tool. All of the activities described in this paragraph are not considered to be in the public domain category described in bold print above. **Your signature (parent/guardian) will authorize your selected option** with respect to your son/daughter (as named on this form) being involved with the following activities:

1. Interviewed by the media; approved community organizations; School Division.
2. Photographed by the media; approved community organizations; School Division.
3. Video or audio recorded by the media; approved community organizations; School Division.
4. Having student work and/or accomplishments displayed, recognized, or reproduced outside of school (i.e. signed art work, creative writing, Student of the Day, or academic presentations such as science fair projects).
5. Having student work posted in various social media tools for educational purposes.
6. Having your son's/daughter's name, school, grade, photo, and write ups in newsletters, yearbook or other school or school division publications, and local print and broadcast publications, ECACS websites, or social media.
7. Having your son's/daughter's name and information shared with the school council.
8. Having your son's/daughter's name and information shared with the local parish.

**Note: Information relating to these student work/recognition activities noted in points 4, 5 and 6 are often communicated to the home in advance.**

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Please select either Option 1 or 2 below

**Option 1:**

I have read the information above and understand and accept that there are a variety of uses that may be made of personal information in the context of a school setting, including the items listed under points 1 through 6 above. I give my consent to having my son/daughter involved with all of the activities listed under points 1 through 8 above.

Yes

**Option 2:**

I have read the information above and understand and accept that there are a variety of uses that may be made of personal information in the context of a school setting. However, I will **NOT** provide my general consent to allowing my son/daughter to participate in the activities described in points 1 through 8 above. Specifically I do not consent to the following activities (Please indicate the applicable activities objected to):

1     2     3     4     5     6     7     8

**If you have any questions or concerns regarding the collection or use of information, please contact the FOIP Coordinator at ECACS Office at 780-842-3992.**

\_\_\_\_\_  
**Parent/Guardian Name (Please Print)**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

Reference: STAR Catholic FOIP Form



## EAST CENTRAL ALBERTA CATHOLIC SCHOOLS ANNUAL STUDENT RESPONSIBLE USE AGREEMENT

All students granted access to East Central Alberta Catholic Schools technology resources must follow the responsible use rules below:

### General

- ✦ ECACS technology resources are provided for the express purpose of supporting student learning in a 21<sup>st</sup> century Catholic learning environment.
- ✦ ECACS technology resources must not be used to engage in acts that are contrary to the mission and purposes of the Division, to intimidate or harass, degrade performance, deprive access to a Division resource, obtain extra resources beyond those allocated, or to circumvent computer security measures. Obscene or inappropriate materials must not be intentionally accessed, created, stored or transmitted.
- ✦ Access to questionable material for the purpose of academic research requires written approval of a teacher or principal.
- ✦ Misuse of technology may result in student access being suspended at any time at the discretion of the principal or Central Office.
- **I must not copy or reproduce any licensed software except as expressly permitted by the software license, use unauthorized copies on Division-owned computers or use software known to cause problems on Division-owned computers.**
- **I am expected to show proper care for Division technology.**

### Data Protection

- ✦ Any data stored on servers outside of ECACS such as Google should **not** be considered as private or confidential as it could be accessed by others according to the laws of the host country (where the files are stored). For example, if the files are stored on a server in the United States, they may be legally subject to government review upon request; therefore, confidential or private information should **not** be stored on these web based services.
- **I will not attempt to access data or programs contained on systems for which I do not have authorization or consent.**

### Virus Protection

- ✦ All Computers including personally owned devices connecting to the ECACS network must run current virus protection software. Computers found to be infected with a virus or other malicious code will be disconnected from the ECACS network until deemed safe by the Technology Department.
- **I will not disable or bypass Virus protection software except as required by the temporary installation of software or for other special circumstances.**

### Electronic Mail

- ✦ Delivery of electronic mail is not guaranteed.
- ✦ Electronic Mail is **not** private or confidential.
- **I will not pose as anyone other than myself when sending email, except when authorized to do so by the owner of the email account.**
- **I will not read another user's email unless authorized to do so by the owner of the email account.**
- **I will not send or forward email that is likely to contain computer viruses.**

### Confidential or Protected Information

- ✦ All **confidential or private** student information transmitted over external networks shall be encrypted. This information shall not be sent or forwarded through non-Division email accounts provided by other Internet Service Providers, and shall not be knowingly transmitted via wireless networks to or from a portable computing device unless approved wireless transmission protocols and security techniques are utilized.
- ✦ ECACS does **not** guarantee the privacy of email or of any other data that is stored on external servers such as Google.
- ✦ Student should consider backing up their files that they store locally or using Google or any other external storage provider. ECACS does not back up any data stored by external storage providers or local computers.
- **I will not use audio or video devices to capture photos, audio or video at school without permission from both a staff member and the subject (s) of the recording.**

### Incidental Use of Technology resources

- ✦ Incidental personal use of electronic mail and internet access is permitted by Division procedure but it must not interfere with normal performance of a student's duties, must not result in direct costs to ECACS, and must not expose the Division to unnecessary risk.
- ✦ Non-school related information should not be stored on Division network file servers.
- ✦ Any files, messages or documents residing on ECACS computers may be subject to public information requests and may be accessed by the Division. Therefore, a Division email account should not be used for personal email correspondence that is confidential in nature.
- **I will not use ECACS technology resources to store or transmit any confidential personal information.**

### Internet Use

- ✦ Software for browsing the Internet is provided to authorized users for educational and research purposes.
- ✦ Due to network maintenance and performance monitoring and to ensure compliance with applicable laws and policies, all user activity may be subject to logging and review.
- ✦ Email or postings by students to news groups, "chat rooms" or "listservs" must not give the impression that they are representing, giving opinions, or making statements on behalf of ECACS, unless authorized. Students should use a disclaimer stating that the opinions expressed are their own and not necessarily those of ECACS.
- **I agree to adhere to copyright laws with regards to duplication or replication of other people's work.**

### Personally Owned Digital Devices

- ✦ All computers and portable-computing devices using ECACS technology resources shall be password protected against unauthorized access to Division technology resources.
- ✦ If it is determined that required security related software is not installed on a personal computer or that the computer has a virus or in some way endangers the security of the ECACS technology resources the account and/or network connection will be disabled. Access will be re-established once the student can demonstrate to Central Office that the computer or device is safe.
- ✦ Special care shall be taken to protect information stored on laptops or any personal digital device, and in protecting such devices from theft. All portable computing devices shall encrypt all private, confidential data to ensure confidentiality in the event that the device is lost or stolen.
- ✦ Student owned devices in class may only be used with teacher permission in accordance with the school's conduct policy.
- ✦ Students are responsible to service their own devices as required. ECACS will only support the connection to the network and its related services.
- ✦ The Division is not responsible for the loss, theft or damage of a student owned device.
- ✦ Division personnel may access student personal digital devices if there is reasonable grounds to believe that there has been a breach of school rules or policies and that a search of the device would reveal evidence of that breach. This may include but is not limited to audio and video recordings, photographs taken on school property that violated the privacy of others or is related to bullying.
- **I will only connect my personal digital device(s) to the wireless network provided for student use. I will not attempt to connect my device(s) to the Division's wired network.**
- **I agree to take precautionary measures to protect my personal digital device(s) from unauthorized access.**

### Passwords

- ✦ Every student account password, any personal identification numbers (PIN), security token or any other similar information or device used for identification and authorized purposes must not be shared. Each student is responsible for all activities conducted using his or her account(s).
- ✦ Users should not circumvent password entry through use of auto logon, application "remember password" features, embedded scripts or hard-coded passwords in client software.
- **I agree to keep my personal passwords private and confidential.**
- **I will not attempt to circumvent any password protected device or software security.**

### Security

- ✦ Security programs or utilities that reveal or exploit weaknesses in the security of a system or that reveal data by circumventing established authorization procedures and systems should not be downloaded and/or used. For example, the use of password cracking programs, packet sniffers, or port scanners on Division networks is **not** permitted.
- ✦ Users must report any identified weaknesses in ECACS computer security and any incidents of possible misuse or violation of this agreement to a teacher or Principal.
- ✦ Where technically feasible, all laptops or other personal digital devices should be secured with a password – protected screensaver for personal protection.
- **I agree not to download, install or attempt to use any software that is designed to reveal or exploit.**

### **Parent/Guardian Acknowledgement**

I acknowledge that I have received and read the ECACS Responsible Use Agreement. I have reviewed and discussed each bullet with my child, and I understand and acknowledge that my child must comply with the agreement when accessing and using technology resources. I further understand and acknowledge that any failure to comply with the agreement may result in appropriate disciplinary action and/or legal action.

\_\_\_\_\_  
Print Name

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

\_\_\_\_\_  
Date

### **Student Acknowledgement**

I acknowledge that I have received and read the ECACS Responsible Use Agreement. I understand and acknowledge that I must comply with the agreement when accessing and using technology resources. I further understand and acknowledge that any failure to comply with the agreement may result in appropriate disciplinary action and/or legal action.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

Reference: STAR Catholic Form 140-1



In-Town Field Trip Permission Form  
School Year: 2021-2022

Dear Parents,

Throughout the school year, students will be participating in some field trips in and around town. These excursions include, but are not limited to attending mass at church, participating in the Terry Fox Run, attending the Remembrance Day Program and possible other functions at the community center. The trips could include skating, swimming, curling, golfing and other school day curricular events. Class field trips in town, related to curriculum (i.e. nature walk) and any other appropriate in-town field trips would be covered by this consent form.

\*\*We realize many activities may not take place due to COVID, but would like to include them on the list in the event we are able to defer them to another date.

To reduce the number of forms being sent home, we would prefer to send one consent form in September to cover all **in-town** field trips and events throughout the year. Parents would still be notified in advance of any such trips, and would have the opportunity to contact the school if they prefer their child not participate in any particular event. This consent form only covers **in-town** field trips. Any field trips outside of town, such as a sports trip or ski tips would still require separate consent forms.

Thank you for you cooperation and understanding in this matter. Please sign below and return to the school. This consent will give permission for your child to participate in **in-town** field trips.

Thank you

School Principal

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2021-2022 **in-town** Field Trips – PERMISSION SLIP

I give permission for my child, \_\_\_\_\_ to participate in **in-town** field trips (such as attending mass at Church, participating in the Terry Fox Run, etc.) throughout the year. Some of these trips will be by bus and some will be walking. I understand that although these are low risk activities, there are some risks involved with every activity. Riding a bus or walking on the sidewalk involves traffic risks. Skating at the rink and running involves sports injury risks. I understand that the staff and bus drivers will act accordingly to maximize the safety of students. I can also opt my child out of any **in-town** field trip by calling the school.

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

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