

Luni Coding — Registration Form

Ontario Curriculum Aligned Coding & Math · Kitchener-Waterloo
A program by Luni Tech Solutions · lunitech.ca · info@lunitech.ca

Program Selection

Track	Ages / Grades	Ontario Curriculum Link	Select
Block Coding (Scratch)	7–9 / Gr. 2–3	Sci&Tech 2022 Strand A2	<input type="checkbox"/>
Python Adventure	10–13 / Gr. 5–8	Sci&Tech 2022 Strand A2	<input type="checkbox"/>
Math Mastery	7–15 / Gr. 2–10	Ontario Math 2020 — All Strands	<input type="checkbox"/>
Web Design (HTML/CSS)	11–14 / Gr. 6–9	Sci&Tech 2022 Strand A2	<input type="checkbox"/>
Game Development	12–15 / Gr. 7–10	Algebra + Coding	<input type="checkbox"/>
Data & AI Basics	13–15 / Gr. 8–10	Strand D + AI Expectations	<input type="checkbox"/>

Session Preference

Format	Select	Day Preference	Select	Start Date Preference
Online (Zoom)	<input type="checkbox"/>	Weekday evenings	<input type="checkbox"/>	
In-person (KW)	<input type="checkbox"/>	Saturday morning	<input type="checkbox"/>	
Hybrid	<input type="checkbox"/>	Sunday afternoon	<input type="checkbox"/>	

Student Information

Student Full Name:

Date of Birth (DD/MM/YYYY):

Age:

Current School:

Grade (2025-2026):

WRDSB / WCDSB / Other:

Prior Coding Experience:

Prior Math Level:

Any Learning
Accommodations:

Parent / Guardian Information

Parent / Guardian Full Name:

Relationship to Student:

Email Address:

Phone Number:

Home Address:

City / Postal Code:

Preferred Contact Method:

Best Time to Contact:

Consents & Agreements (Parent / Guardian)

Photo / Video Consent	I consent to my child being photographed or recorded during sessions for use on Luni Tech Solutions' website and social media. (Circle: YES / NO)	Initials: _____
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Medical / Emergency Authorization	In the event of a medical emergency and if I cannot be reached, I authorize Luni Tech Solutions staff to seek emergency medical attention for my child. Emergency contact: _____ Phone: _____	Initials: _____
Liability Waiver	I acknowledge that participation in Luni Coding activities is voluntary. I agree to release Luni Tech Solutions, its employees, and associates from liability for accidents or injuries during in-person or online sessions, except where caused by gross negligence.	Initials: _____
PIPEDA / Privacy Consent	I consent to Luni Tech Solutions collecting and using my child's personal information (name, grade, school board) solely for program delivery, as required by Canada's Personal Information Protection and Electronic Documents Act (PIPEDA).	Initials: _____
Ontario Child Safety Acknowledgement	I confirm that all instructors at Luni Coding are made aware of Ontario's duty-to-report obligations under the Child, Youth and Family Services Act, 2017 (CYFSA).	Initials: _____
Refund Policy Agreement	I understand the refund policy: full refund if cancelled 7+ days before start; 50% if 3-6 days before; no refund within 48 hours of first session.	Initials: _____

Signature

Parent / Guardian Signature:

Printed Name:

Date:

How to Submit: Email completed form to info@lunitech.ca with subject line '*Luni Coding Registration — [Child's Name]*'. A confirmation and invoice will be sent within 2 business days. Questions? Visit lunitech.ca or call us.