



## Registration for 2026-2027 5K - 8th Grade

A non-refundable \$100 registration fee per student, payable to St. Joseph School, must accompany this form. *This fee is waived for students enrolling in the Private School Choice Program.*

A separate form for 3K and 4K are also available.

Name of referring family: \_\_\_\_\_

### Child's Information

Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth: \_\_\_\_\_ Circle one: Male / Female Religion: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_

Prior School Attended: \_\_\_\_\_ City: \_\_\_\_\_

**Will your child be bussed? Yes / No / Still Deciding**

Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth: \_\_\_\_\_ Circle one: Male / Female Religion: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_

Prior School Attended: \_\_\_\_\_ City: \_\_\_\_\_

**Will your child be bussed? Yes / No / Still Deciding**

Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth: \_\_\_\_\_ Circle one: Male / Female Religion: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church: \_\_\_\_\_ City: \_\_\_\_\_

Prior School Attended: \_\_\_\_\_ City: \_\_\_\_\_

**Will your child be bussed? Yes / No / Still Deciding**

### Father's Information

Name of Father: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City) (Zip)

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ Circle: Mobile / Home / Work Email: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Occupation: \_\_\_\_\_ Religion: \_\_\_\_\_

## Mother's Information

Name of Mother: \_\_\_\_\_  
(Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Maiden) \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) \_\_\_\_\_ (City) \_\_\_\_\_ (Zip) \_\_\_\_\_

Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ Circle: Mobile / Home / Work Email: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Occupation: \_\_\_\_\_ Religion: \_\_\_\_\_

## PRIMARY PLACEMENT OR CUSTODY (please provide the court documentation upon acceptance)

Parents are (circle one): Married / Divorced / Separated / Remarried / Widowed / Unmarried

Individual with whom the child primarily lives (circle one): Both parents / Father / Mother / Other: \_\_\_\_\_

Does the parent with whom the child does not live have any court restrictions on his/her parental rights? Yes / No

If the child lives with the remarried parent, is the parent's spouse the adoptive parent? Yes / No

## Additional Information

Has your child ever repeated a grade? Yes / No

Has your child been recommended for an Individual Educational Plan (IEP)? Yes / No

If yes, please describe: \_\_\_\_\_

Are there any other special circumstances concerning your child that we should be made aware of? \_\_\_\_\_

I am a registered parish member of: (Circle one) St. Joseph Congregation / Other: \_\_\_\_\_

How did you hear about our school? (Circle all that apply): Church / Yard Sign / Banner / Website / Google / Facebook /

Door Hanger / Mailer / Friend / Relative / Other: \_\_\_\_\_

## Acknowledgement

By signing below, I acknowledge the information in this form is accurate. I acknowledge that new students are accepted on a probationary basis. I understand registration, placement and continued study are dependent upon accommodating religious, educational and behavioral needs of my child.

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

(Signature) \_\_\_\_\_

(Print name) \_\_\_\_\_

**NEW STUDENTS ONLY: Please return this form to the School Office along with the child's original birth certificate. The birth certificate will be returned to you.**

## Office Use Only

- Received registration form, date: \_\_\_\_\_
- Received registration fee:
  - Cash, receipt provided, date: \_\_\_\_\_
  - Check #: \_\_\_\_\_, date: \_\_\_\_\_
  - Not Applicable
- Received & annotated birth certificate, date: \_\_\_\_\_