



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.

(Signature) Date: _____

(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: _____