



2020-21 School Year
Registration Form
K3 or K4 Program

Please register my child in (check one program):

_____ 3K Thursday & Friday 8:00 AM-11:00 AM

_____ 4K Monday, Tuesday & Wednesday 8:00 AM-3:00 PM

Full Name of Student: _____ Gender (circle one): M or F

Date of Birth: _____ Religion: _____ Parish: _____

Ethnicity of Student: _____ Special Needs: _____

Custodial Arrangement (circle one): lives with both parents / mom / dad / guardian

Home Address: _____ Home Phone: _____

Mother's Name: _____	Father's Name: _____
Place of Employment: _____	Place of Employment: _____
Occupation: _____	Occupation: _____
Work Phone: _____	Work Phone: _____
Cell Phone: _____	Cell Phone: _____
Email: _____	Email: _____

To Enroll:

_____ To ensure your child's spot in the class a \$45 non-refundable Registration Fee is required.
A child is not considered registered until this fee is received.

_____ This form, and the Tuition Contract needs to be fully completed, signed and returned with the Registration Fee

_____ An original copy of your child's birth certificate (this will be returned to you) and your child's current immunization record, if this is not already on file in the St. Joseph School office.

Note: It is important to register immediately because once the class has been filled to capacity with registered students, a waiting list is started.