

ST. JOSEPH'S CATHOLIC SCHOOL
2012-2013 STUDENT PRE-REGISTRATION APPLICATION

Please Print. Please list only children that are making application for the 2012-2013 school year. Pre-registration information will be complete upon receipt of child's prior school and attendance records. It is the responsibility of the parent to supply St. Joseph's Catholic School with the documentation. It is the responsibility of the parent to verify parish registration. It is the responsibility of the parent to update information and remain current on the pre-registration list. Please complete the front and back of this form. Please include the \$50.00 per child non-refundable pre-registration fee.

Last: _____	First: _____	M.: _____	Grade for 12-13: _____
Male _____ Female _____	Birth date: _____	Religion/Parish: _____	Baptism Date: _____

Last: _____	First: _____	M.: _____	Grade for 12-13: _____
Male _____ Female _____	Birth date: _____	Religion/Parish: _____	Baptism Date: _____

Last: _____	First: _____	M.: _____	Grade for 12-13: _____
Male _____ Female _____	Birth date: _____	Religion/Parish: _____	Baptism Date: _____

MOTHER'S NAME: _____		Home Phone: _____	
Address: _____		Zip: _____	
Place of Employment: _____		Work Phone: _____	Cell: _____
Mother's Religion/Parish: _____		Pager: _____	
FATHER'S NAME: _____		Home Phone: _____	
Address: _____		Zip: _____	
Place of Employment: _____		Work Phone: _____	Cell: _____
Father's Religion/Parish: _____		Pager: _____	
OTHER CONTACT NAME: _____			
Relationship: _____		Phone: _____	

Name of prior school: _____ Address: _____
 Name of prior principal: _____ Phone: _____
 Name of prior teacher(s): _____ Phone: _____

I give permission to the principal of St. Joseph's Catholic School to communicate with my child(ren)'s prior or current school's principal and/or teachers, or counselors concerning my child(ren).

 Signature of parent Date

OVER

FOR OFFICE USE ONLY:
 Date Received: _____
 Check # _____ Cash _____
 Parish Reg. Date: _____

Did you attend St. Joseph's Catholic School? _____ yes grades/date _____ no

Did you attend Bishop Kelly High School? _____ yes grades/date _____ no

Please list other Catholic schools you attended?

Are you a St. John's parishioner? ___yes ___no If yes, when did you register? _____

Please list parish activities or groups you have been involved in?

List St. Joseph's Catholic School activities you have been involved in:

If new to the Treasure Valley, did you belong to a Catholic parish? Explain:

Please add any other information that maybe helpful.

Kindergarten Only: (Mark One) _____ All Day Kindergarten; or _____ Half Day Kindergarten

Are you willing to transfer your child to St. Joseph's during the school year, if there is an opening? ___yes ___no.

Do you want your child(ren) move to the 2013-2014 Pre-Registration list, if there are no openings during 2012-2013 school year?

___yes ___no

How did you hear about, and what brought you to St. Joe's?

___ Friend or relative attends

___ Has a good reputation in the community

___ Saw notice of Open House or ad in:

___ Catholic Register

___ Bulletin (Which Church? _____)

___ Other Media (_____)

___ Other Source (_____)

REVISED 1/19/12