

ST. JOSEPH SCHOOL
K4 REGISTRATION FOR 2014-2015 SCHOOL YEAR

Today's Date _____

Are you are parishioner? _____

Family Name Street Address City Zip Code

Father's Name Occupation Religion

Mother's Name Occupation Religion

Phone Number Preferred Daytime Phone Number

E-mail address _____

Will your child be bussed? Yes _____ No _____

School your child would attend if not enrolled at St. Joe's: _____

Non-Refundable Registration Fee per student: (fee must accompany this form)
K4 Registration fee - \$200 per student

Child's Name Date of Birth Gender

Class Desired *(Please select length of day and number of days)*

- | | |
|--|---|
| <input type="checkbox"/> 4 Half Day, 7:45a.m.-11:15a.m. (M,T,H,F);
Annual tuition: \$2,450 | <input type="checkbox"/> 5 Half Days, 7:45a.m.-11:15a.m.;
Annual tuition: \$2,650 |
| <input type="checkbox"/> 4 Full Day, 7:45a.m.-2:30p.m. (M,T,H,F);
Annual tuition: \$2,850 | <input type="checkbox"/> 5 Full Days, 7:45a.m.-2:30p.m.;
Annual tuition: \$3,050 |

I understand that toilet independence is mandatory by the first day of school. _____
Initials

New students are accepted on a probationary basis. The student's progress will be evaluated to determine permanent placement. If St. Joseph School cannot accommodate the needs of the child, a recommendation will be made for placement under the auspices of the public school system.

I understand registration, placement and continued study are dependent upon accommodating religious, educational and behavioral needs of my child.

Parent's Signature

Date