SAINT JOSEPH PARISH 2022/2023 REGISTRATION FORM RETURNING STUDENTS RETURN BY 6/30/22

Grade in September		MF	
Child's Name			
Last	First	MI	
Address			
Home Phone	Cell Phone		
E-Mail Address			
Fathers name:	Mothers maider	name:	
IN CASE OF EMERGENCY			
Name	Phon	e	
Relationship to child	Cell P	hone	
Allergies – Please List	Medications –	Please List	
			_
Do you need a payment plan? ()	yes () no		
Total number of children enrolled: Total payment due (including Sacra Balance Due:	mental Fee):		
Date Received:			
Payment plan: YES / NO			
Tuition: 1 child \$100 2 children \$115	Sacramental Fee: First Communion: \$30 Confirmation: \$50		
3 or more \$125			