

Formation Registration 2024-2025

Family Name: _____ Today's Date: ____/____/____
 Head of Household: _____ Spouse: _____
 Last Name: _____ Last Name: _____
 First Name: _____ First Name: _____
 Suffix: _____

Family Info: Registered in parish Yes No Name of Parish: _____
 Home Address Line 1: _____
 Home Address Line 2: _____
 City/State: _____ Street Zip: _____

Phone Number	Description	Unlisted?
_____	Home/Office/Cell/Other	Yes/No
_____	Home/Office/Cell/Other	Yes/No
_____	Home/Office/Cell/Other	Yes/No
_____	Home/Office/Cell/Other	Yes/No

Email: _____ Send Email when possible? Yes No

Siblings in SRI: Name: _____ Grade: _____ Session: _____
 Name: _____ Grade: _____ Session: _____
 Name: _____ Grade: _____ Session: _____
 Name: _____ Grade: _____ Session: _____

Student Information: Last Name: _____ First Name: _____
 SRI Session: (Please check preferred session)
 Sunday, 9:00-9:50 AM Sunday, 11:00-11:50 AM
 Distance Learning

Personal: Relationship: _____ Gender: _____ Grade: _____
 Language: _____ Birthdate: _____ Ethnicity: _____
 Health Issues: _____ Special Needs: _____
 Religion _____ School: _____
 Doctor/Phone: _____ Hospital Pref: _____

Check which sacraments have been recieved: Baptism 1st Penance 1st Communion Confirmation
 Baptism Certificate on file yes no

Emergency Contacts: Name: _____
 Relationship: _____ Phone Number: _____
 Name: _____
 Relationship: _____ Phone Number: _____

Fees: TUITION HOMESCHOOL TUITION Please make check payable to:
 2024-2025 \$85.00 - 1 child \$50.00 1 child St. Joseph Church
 \$140.00 - 2 or more children \$65.00 2 or more children
 \$15.00 late fee after Oct. 13, 2024 Amount Enclosed: _____

Office Use: _____ Date Rec'd _____ Amount _____ Cash _____ Check/Check # _____