

**St. Joseph School
REGISTRATION FORM/CENSUS**

FAMILY NAME: _____ **EMAIL ADDRESS:** _____

STUDENT (S) NAME (**Please Print**)

_____	_____	_____	GRADE _____	M	F
LAST	FIRST	MIDDLE			
_____	_____	_____	GRADE _____	M	F
LAST	FIRST	MIDDLE			
_____	_____	_____	GRADE _____	M	F
LAST	FIRST	MIDDLE			
_____	_____	_____	GRADE _____	M	F
LAST	FIRST	MIDDLE			

CATHOLIC Envelope No. _____ CATHOLIC, OUT OF PARISH NON-CATHOLIC

RELIGION

_____	_____
PARISH OF REGISTRATION	PARISH IN WHICH YOU RESIDE
BAPTISM: _____	FIRST COMMUNION: _____
YEAR PARISH	YEAR PARISH

ETHNIC BACKGROUND

HISPANIC or LATINO Not HISPANIC or LATINO

RACE:

NATIVE AMERICAN	PACIFIC ISLANDER/HAWAIIAN
BLACK/AFRICAN AMERICAN	TWO or MORE RACES
WHITE/CAUCASIAN	UNKNOWN
ASIAN	

Language spoken at home: _____

Student lives in home with:

MOTHER

LAST NAME FIRST

STEPMOTHER

LAST NAME FIRST

Guardian/Relationship _____

LAST NAME FIRST

FATHER

LAST NAME FIRST

STEPFATHER

LAST NAME FIRST

LAST NAME FIRST