



# ST. ISAAC JOGUES CATHOLIC SCHOOL

## School Year 20\_\_\_\_ **Registration Form**

ENTERING GRADE: \_\_\_\_\_ KINDERGARTEN FULL DAY \_\_\_\_\_ KINDERGARTEN ½ DAY \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
(Last) (First) (Middle)

Social Security Number: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Birth City: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Street) (City) (Zip)

Which Parish is Family Registered At?: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Public School District You Reside In: \_\_\_\_\_ Last School Attended/City: \_\_\_\_\_

Any Health Issues/Allergies: Yes \_\_\_ No \_\_\_ If Yes, explain \_\_\_\_\_

Parent/Guardian with whom student lives: Mr. Mrs. Ms. \_\_\_\_\_

(with exception of widow or widower: proof of physical custody must be provided.)

### FAMILY DATA

#### FATHER

Name: \_\_\_\_\_  
Country of Birth: \_\_\_\_\_  
Language in Home: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Marital Status: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Parish Affiliation: \_\_\_\_\_  
Step Parent/Guardian (if any): \_\_\_\_\_

#### MOTHER

Name: \_\_\_\_\_  
Country of Birth: \_\_\_\_\_  
Language in Home: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Marital Status: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Parish Affiliation: \_\_\_\_\_  
Step Parent/Guardian (if any): \_\_\_\_\_

Other Children In Family: (name and birthdate)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### IF YOUR CHILD IS NEW TO ST. ISAAC JOGUES SCHOOL, COMPLETE THE FOLLOWING:

Last School Attended & Grade Completed \_\_\_\_\_ City & State: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church: \_\_\_\_\_ City & State: \_\_\_\_\_

Date of 1<sup>st</sup> Communion: \_\_\_\_\_ Church: \_\_\_\_\_ City & State: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Church: \_\_\_\_\_ City & State: \_\_\_\_\_

**If your child is transferring and new to St Isaac Jogues, family will need to fill out a Records Release Form**

(Office use only) Birth Certificate: \_\_\_\_\_ Health Form: \_\_\_\_\_ Oldest: \_\_\_\_\_