

**ST. JOAN OF ARC SCHOOL**

**REGISTRATION RECORD**  
**Kindergarten (Please Print Neatly)**

Date \_\_\_\_\_

Pupil \_\_\_\_\_ Sex \_\_\_\_\_

(Last) (First) (Middle)

Address \_\_\_\_\_ School District \_\_\_\_\_

E-mail (Mother) \_\_\_\_\_ E-mail (Father) \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell Mom \_\_\_\_\_ Cell Dad \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_

Religion \_\_\_\_\_ Language spoken at home \_\_\_\_\_

Race: White \_\_\_\_\_ Black \_\_\_\_\_ American Indian/Alaskan \_\_\_\_\_ Asian \_\_\_\_\_ Hawaiian/Pacific Islander \_\_\_\_\_

Ethnicity: Hispanic or Latino \_\_\_\_\_ Non Hispanic or Latino \_\_\_\_\_

Parish where you are registered \_\_\_\_\_

Pre-School attended : \_\_\_\_\_ Tel. # \_\_\_\_\_

I would prefer my child attend Kindergarten: Full Day \_\_\_\_\_ Half Day \_\_\_\_\_ Not Sure \_\_\_\_\_

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BAPTISM (Certificate to be presented)	PARISH	LOCATION	DATE

	NAME	ADDRESS	OCCUPATION	RELIGION	EDUCATION
FATHER					( ) Elem. ( ) Coll. ( ) Sec. ( ) Ad.
MOTHER					( ) Elem. ( ) Coll. ( ) Sec. ( ) Ad.
Guardian					

(Relationship of Guardian to Child)

Home Situation ( ) Two Parents ( ) One Parent ( ) Parents separated or divorced  
 (Check all that apply) ( ) Restructured-mother/stepfather ( ) Father remarried ( ) Mother remarried  
 ( ) Restructured-stepmother/father ( ) Other Child resides with \_\_\_\_\_

*Status	Sibling (full name)	Date of Birth	*Status	Sibling (full name)	Date of Birth

\*Status - Use a check to indicate if sibling no longer resides at home)

A complete health record with immunizations, etc. must accompany registration. St. Joan of Arc admits students of any race, color, national or ethnic origin. NOTE: THIS IS A REGISTRATION. OFFICIAL ACCEPTANCE WILL FOLLOW. I/We have read all registration information and agree to fulfill all necessary requirements for enrollment of my child/children in St. Joan of Arc School.

Parent's Signature: \_\_\_\_\_

\*\*\*\*\* OFFICE USE ONLY:

Baptism Cert. _____	\$100.00 Reg. Fee Ck# _____	Health Record _____
Birth Cert. _____	Parish-Family Agreement _____	Immunization _____
B6T Bus _____	Religious Ed. Form _____	Physical _____
Textbook _____		Dental _____