

♦ 119210 Larch Street | PO Box 6 | Stratford, WI 54484 ♦ Phone: 715-687-4145 ♦

2024-2025 STUDENT REGISTRATION FORM

PARENT 1 INFORMATION

FIRST	Г	MIDDLE	OR MAIDEN	
nt)				
	STATE	ZIP		
	· 			
HOME	CELL		WORK	
	MEMBER OF			PARISH
	WORKPLACE			
<u>ON</u>				
nt)				
	STATE	ZIP		
HOME	CELL		WORK	
	MEMBER OF			PARISH
OCCUPATION				
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	HOME HOME HOME The Parents Factory of that portion of	THRST STATE HOME	HOME CELL MEMBER OF WORKPLACE STATE ZIP MIDDLE MEMBER OF WORKPLACE THOME CELL MEMBER OF WORKPLACE HOME CELL MEMBER OF WORKPLACE MEMBER OF WORKPLACE The Parents Father Mother Other of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of that portion of the divorce decree that indicates who has a copy of the copy of that portion of the divorce decree that indicates who has a copy of the copy	STATE ZIP



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PLEASE LIST ALL CHILDREN IN YOUR FAMILY (Grade school age and under)

FIRST NAME	MIDDLE NAME	LAST N	AIVIE A	GE	RACE/ ETHNICITY	GRADE FOR 2024 2025
EASE FILL IN F	OLLOWING	 INFORMATIO	ON FOR NEW	' STUL	DENTS TO OU	R SCHOOL
LEASE FILL IN F NAME		INFORMATION BIRTH DATE	ON FOR NEW BIRTH PLACE		DENTS TO OU BAPTISM DAT	
LEASE FILL IN F NAME						

NAME:	RELATION:	PHONE:	
NAME:	RELATION:	PHONE:	
AFTERSCHOOL CARE PROVIDER _			
	NAME	ADDRESS & PHONE	
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## **Catholic Doctrine/Non Discrimination Policy**

St. Joseph is a Catholic School in the Diocese of La Crosse. As a Catholic School, we will teach and advocate our Catholic Faith. All students are welcome in our school, and all parents and legal guardians must understand that Catholic Doctrine will be taught. The passing on of our Catholic Faith is our number one priority. St. Joseph Catholic School admits students of any race, color, national, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.