Returning Family Registration 2024-2025



Check #___

Date		
Parent NameLast	Father	Mother
A 1.1		
AddressStreet	City	Zip
E-Mail addressE	-mail address	Check here for "do not publish".
Father Cell Phone	Mother Cell Phone	
Father Business Phone	Mother Business Phon	e
Person responsible for tuition payment	Relationship to child	Marital Status:
STUDENT NAME	GRADE ENTERING	BIRTHDATE
1		
2		
3		
_		
	new to SJS, a new student registration from will nee	d to be completed for that child.
	nic Hispanic	Native American
√ <i>ONE ONLY</i> African America	n Multi-racial	
Language spoken at home		
Parish at which family is registered	St. James Paris	n Envelope Number
Public School child/ren would attend		
Names and ages of elementary children no	ot enrolled at St. James	
Are parents alumni of St. James School?	□Yes □ Mom □ Dad □ No	
Photo Release On occasion, the school uses photos and/or a earbook, advertisements, bulletin articles, a live permission for the school to publish myndividual photos.	and other public relations material). B	y initialing and signing below, I
-		•
		Office use on
Parent/Guardian Signature	Date	Bk/Sup. Fee pd