HIGH SCHOOL REGISTRATION
2022-23

ST. JOSEPH UNIVERSITY PARISH

WHO: REGISTERED MEMBERS OF THE PARISH IN GRADES 9-12 ****WE REQUIRE A COPY OF YOUR BAPTISMAL CERTIFICATE AT THE TIME OF REGISTRATION FOR NEW STUDENTS****

FULL NAME: _____

NOTE: We communicate primarily via email and the Band App to save on mailing and paper costs. We need two working email addresses, which you check regularly. Please write legibly.

YOUTH EMAIL:_____

PARENT(S) EMAIL: _____

ABOUT YOU: Do you have any dietary restrictions or food allergies?_____

GRADE: 9 10 11 12 BIRTHDATE: _____ NICKNAME: _____

CURRENT SCHOOL: _____

CHURCH OF 1st EUCHARIST: _____ DATE: _____

CHURCH OF 1ST RECONCILIATION: _____DATE: _____

CHURCH OF CONFIRMATION: _____ DATE: _____

FATHER'S NAME: _____ _____
Last First

MOTHER'S NAME: _____ _____ _____
Last First Maiden

HOME ADDRESS: _____

CITY/TOWN: _____ ZIP CODE: _____

PHONE NUMBER(S):

YOUTH CELL: _____ MOTHER CELL:_____

HOME:_____ FATHER CELL:_____

REGISTRATION FEE: $100 for one or $150 for two or more high school youth from the same family.
For non-parishioners an additional $250.00 fee will apply.

07-05-22 dmb