St. Francis – St. James School

486 View Street • Saint Paul, MN 55102-3592 • 651-228-1167 • sfsjus@sf-sj.org

Registration Form

■ **Registration Fee:** $50 per child *(NON-REFUNDABLE)* ■ **MUST** accompany this form for children to be registered

FULL LAST	FIRST	MIDDLE	SEX	BIRTHDATE	GRADE

Address: _____
STREET **CITY** **STATE ZIP**

Telephone: (_____) _____ Email Address: _____

	FATHER'S INFORMATION	MOTHER'S INFORMATION
Name (First & Last)		
Parish / Religion		
Employment / Business Address		
Business Phone with Area Code		
Home Phone with Area Code		
Cell Phone with Area Code		

In case of emergency *(when parent cannot be reached):*

Name: _____ Telephone: (_____) _____

Name: _____ Telephone: (_____) _____

Child resides with: _____

CHILD'S NAME:

	DATE	CHURCH	CITY	STATE
Baptism				
Communion				
Confirmation				

OTHER CHILDREN IN FAMILY

NAME	BIRTHDATE	SCHOOL ATTENDING

Date **Signature** of parent or legal guardian **Relationship** to child