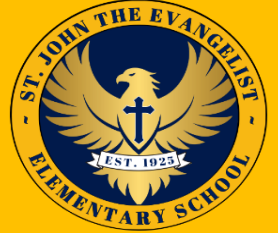


St. John The Evangelist

Kindergarten - Sixth Grade Registration Form

321 N. Market St., Logan, OH 43138

stjohnlogan.org (740)385-2767



Previous School (If Applicable)

School	Grade Completed	Address of School

STUDENT INFORMATION

Full First Name:	Middle:	Last:
Date of Birth:	Gender:	SSN (required):
Address:	City:	Zip:
Home Phone # :	Birth City, State:	Grade Entering:
Religious Affiliation:	Parish:	Baptised: Yes or No
Race, please circle: (You are not required to answer this question)		
White	Black	Asian
		Hispanic
		Other

PARENT INFORMATION

Father's Name:	Mother's Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
Home Phone #:	Home Phone #:
Cell Phone #:	Cell Phone #:
Work Phone #:	Work Phone #:
Email (required):	Email (required):
Religious Affiliation:	Religious Affiliation:
Parish:	Parish:
Birth City and State:	Birth City and State:
Occupation:	Occupation:
Place of Employment:	Place of Employment:

Home Status: Please circle all that apply

Married	Separated	Divorced	Single	Guardian	Mother Deceased	Father Deceased
Fill out the following if it applies to the student's home status, divorced, separated, guardian, or other.						
Name of Primary/Custodial Parent and Relationship:						
Do you wish for school mailings to be sent to both parents? Yes or No						
St. John the Evangelist is required to have a copy of the custodial orders on file.						
Other (parent-like) Adult in Father's Home			Other (parent-like) Adult in Mother's Home			
Name:			Name:			
Relationship: <input type="radio"/> Step-parent			Relationship: <input type="radio"/> Step-parent			
<input type="radio"/> Other :			<input type="radio"/> Other :			

Please complete the reverse side if applicable.

Sacraments Your Child Has Received

	Date	Church	City and State
Baptism			
Holy Eucharist			
Confirmation			