

# Saint Joseph the Worker School

2091 North Winn Road  
Father Tom Held, Parochial Administer

Mount Pleasant, Michigan 48858

(989) 644-3970  
Mary Hauck, Principal

## 2019-2020 REGISTRATION AND PAYMENT INFORMATION

### Mission Statement

Saint Joseph the Worker Roman Catholic parish and school encourages its members to live fully the message of Jesus Christ. Inspired by the Holy Spirit through faith, love, sacraments, and service, our parish family will be a community of lifelong achievers and a center for academic excellence.

### STUDENT INFORMATION

Last Name:	First Name:	Middle Name:
Birthday:	Grade:	Gender: M F
Last Name:	First Name:	Middle Name:
Birthday:	Grade:	Gender: M F
Last Name:	First Name:	Middle Name:
Birthday:	Grade:	Gender: M F
Last Name:	First Name:	Middle Name:
Birthday:	Grade:	Gender: M F
Other child(ren) in household:		
School District:	Home Phone Number:	
Home Street Address:		
City:	State:	Zip Code:

### PARENT/GUARDIAN INFORMATION

<b>MOTHER'S Name:</b>	<b>MOTHER'S MAIDEN NAME:</b>	<b>RELIGION:</b>
Street Address:		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	
Employer:	Work Phone:	
Email Address:		
Mother receives duplicate mailings? (circle one) YES NO		
<b>FATHER'S NAME:</b>	<b>RELIGION:</b>	
Street Address:		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	
Employer:	Work Phone:	
Email Address:		
Father receives duplicate mailings? (circle one) YES NO		

### REGISTRATION FEE

**\$100.00 PER STUDENT** Non-Refundable Fee. Please return with form.

### TECHNOLOGY FEE

**\$25.00 PER STUDENT** Non-Refundable Fee. Please return with form.

We/I agree to work with the school staff in the education of faith formation of our/my child(ren). Besides our/my involvement and support of our parish, we/I will also pay tuition. This agreement presupposes my commitment to be actively engaged in living the Catholic way of life as a member of St. Joseph the Worker Parish.

Signature of Parent

Date

OVER

PRACTICAL PARISHIONER TUITION ~ \$1,600.00 Per Family Per Year				
Yearly Pay Plan	Semester Pay Plan	Quarterly Pay Plan	Monthly Pay Plan	
\$1,600 Due August 1, 2019	\$800.00 Due Aug. 1, 2019	\$400.00 Due July 1, 2019	\$133.33 Due 1 <sup>st</sup> of each	
	\$800.00 Due Jan. 1, 2020	\$400.00 Due Oct. 1, 2019	month for 11 months and	
		\$400.00 Due Jan. 1, 2020	12 <sup>th</sup> month \$133.37	
		\$400.00 Due April 1, 2020	July 1, 2019 – June 1, 2020	
<b>We/I intend to pay:</b>	<b>Yearly</b> _____	<b>Semester</b> _____	<b>Quarterly</b> _____	<b>Monthly</b> _____
OTHERS ~ TUITION ~ \$4,100.00 Per Student Per Year				
Yearly Pay Plan		Semester Pay Plan		
\$4,100.00 Due August 1, 2019		\$2,050.00 Due August 1, 2019		
		\$2,050.00 Due January 1, 2020		
<b>We/I intend to pay:</b>	<b>Yearly</b> _____		<b>Semester</b> _____	
LUNCHES				
Day: \$3.35 per lunch	Week: \$16.75	Month: \$67.00	Semester: \$301.50	Year: \$603.00
<b>We/I intend to pay:</b>	<b>Weekly</b> _____	<b>Monthly</b> _____	<b>Semester</b> _____	<b>Year</b> _____

**Ethnic Characteristics Information**  
Due to Federal requirements we must have the following information completed

\*\*\*It is necessary to answer parts A and B and the child's name.\*\*\*

**Part A:** Is your child Hispanic/Latino (choose only one)

\_\_\_\_\_ **NO**, he/she is not Hispanic/Latino. Child's Name(s): \_\_\_\_\_

\_\_\_\_\_ **YES**, he/she is Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race.) Child's Name(s): \_\_\_\_\_

Part A of the question is about ethnicity, not race. Regardless of what you selected in Part A, answer Part B by marking one or more boxes to indicate what you consider your race to be.

**Part B:** What is your race (choose one or more)

\_\_\_\_\_ **American Indian or Alaska Native** (A person having origins in any of the original Peoples of North and South America, including Central America.) Child's Name(s): \_\_\_\_\_

\_\_\_\_\_ **Asian** (A person having origins in any of the original Peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.) Child's Name(s): \_\_\_\_\_

\_\_\_\_\_ **Black or African American** (A person having origins in any of the black racial groups of Africa.) Child's Name(s): \_\_\_\_\_

\_\_\_\_\_ **Native Hawaiian or Pacific Islander** (A person having origins in any of the original Peoples of Hawaii, Guam, Samoa or other Pacific Islands.) Child's Name(s): \_\_\_\_\_

\_\_\_\_\_ **White** (A person having origins in any of the original Peoples of Europe, the Middle East, or North Africa.)

\_\_\_\_\_ Two or more races.

Child's Name(s): \_\_\_\_\_

**NOTE:** Both parts A and B MUST be completed. We encourage you to select an answer for both parts. If either part (A or B) is not answered, the U.S. Department of Education requires the school district to supply an answer on your behalf.