

ST. JOSEPH CATHOLIC SCHOOL
2024-2025
NEW STUDENT REGISTRATION & CONTRACT

Family Information (Please Print Clearly)

Family/Student Last Name _____

PRIMARY FAMILY EMAIL _____

Additional emails to include _____

Father's First Name _____ Last Name _____

Father's Cell Phone _____ Work Phone _____

Mother's First Name _____ Last Name _____

Mother's Cell Phone _____ Work Phone _____

Address _____ City _____ Zip _____

Additional Address (please specify) _____

Religion _____ St. Joseph Parish Member? ____ Yes ____ No

If no, what parish are you a member of? _____

Student Registration Information

Student First Name	Birthdate	Grade 24-25 School Year	Gender	Religion
_____	_____	_____	M/F	_____
_____	_____	_____	M/F	_____
_____	_____	_____	M/F	_____

If registering a child for K3 and/or K4, please circle full or half day:

K3: Full Day or Half Day K4: Full Day or Half Day

Race/Ethnicity (circle) American Indian Hispanic/Latino Asian Caucasian Black Other

School Last Attended: _____ School Address: _____

School Phone Number: _____ Date of last attendance: _____

Has/have your child/ren been subject to disciplinary action by school officials? Yes No

If yes, please explain: _____

Does your child/ren has/have any special educational needs? Yes No

If yes, please explain: _____

Does your child/ren have an individualized education plan (IEP)? Yes No

Has/have your child/ren ever been held back/retained? Yes No

Has/have your child/ren ever been expelled or pending expulsion? Yes No

Tuition Schedule 2024-2025

	Tuition & Fees Non-Parish	Parish Subsidy	Tuition & Fees Active Parishioners	Minimum Recommended Parish Annual Stewardship
K3 TUES/WED/THU Half Day	\$2,395.00		\$2,395.00	
K3 TUES/WED/THU Full Day	\$3,395.00		\$3,395.00	
1 STUDENT (4K/Half Day)	\$4,790.00	\$1,870.00	\$2,920.00	\$1,000.00 (\$20/week)
1 STUDENT (Full day K4-8)	\$6,870.00	\$3,295.00	\$3,575.00	\$1,600.00 (\$30/week)
2 STUDENTS (Full day K3-8)	\$11,050.00	\$4,875.00	\$6,175.00	\$2,400.00 (\$45/week)
3 STUDENTS (Full day K3-8)	\$16,675.00	\$8,300.00	\$8,375.00	\$4,000.00 (\$75/ week)
4 STUDENTS (Full day K3-8)	\$22,400.00	\$12,725.00	\$9,675.00	\$6,250.00 (\$120/week)
5 STUDENTS (Full day K3-8)	\$27,630.00	\$16,880.00	\$10,750.00	\$8,250.00 (\$150/week)

Half Day K3 students do not count towards multi-student discounts.

A non-refundable registration fee of 100.00 per family is due with registration.

In accordance with Archdiocese of Milwaukee guidelines, active parish members are registered members who regularly participate in the prayer and worship life of the community and demonstrate stewardship through sharing of time, talent and financial contributions to the parish.

Registration Fee & Tuition There is a \$100 per family non-refundable registration fee. This fee is prepaid tuition and is due with this registration form. Please make checks payable to **St. Joseph School**. For tuition management, parents can enroll in Blackbaud (parent.blackbaud.school School ID# 11473). Services include online account access, tuition and fees invoicing, payment processing, and 24-hour customer service.

Financial Aid If you would like to apply for financial aid, please go to studentfinancialaid.blackbaud.school. The deadline for applying is May 1st. Awards will be given by May 31st as payments start in July for the upcoming school year. Financial Aid is only awarded to parishioners of St. Joseph Congregation.

My family is participating in the school choice program.

M/WPCP (Milwaukee Parental Choice Program/Wisconsin Parental Choice Program)

Schedule of Payments Please circle option 1, 2, 3 or 4

1. One annual payment in full by August 1st, 2024 – send directly to the school or parish
2. BLACKBAUD Tuition Management – 10 monthly payments (July - April)
3. BLACKBAUD Tuition Management – 12 monthly payments (July - June)
4. BLACKBAUD Tuition Management – quarterly payment plan (July, October, January, April)

For option 2, 3 or 4, please enroll online with BLACKBAUD: parent.blackbaud.school School ID is: 11473

Payment Tuition Owed: \$ _____ Parishioner/Non Parishioner
 \$ 100.00 Registration Fee
 \$ _____ Balance Due

Enrollment Contract St. Joseph Catholic School, located at 2750 N. 122nd Street, Wauwatosa, WI 53222, hereby agrees to accept the enrollment of the above student(s) for the 2024-2025 school year. This acceptance is conditional upon the student(s) meeting the requirements and policies of St. Joseph Catholic School and further upon their adherence to the rules and regulations as stated in the St. Joseph Catholic School Family Handbook.

As parent/legal guardian, I verify that all the information on this form is true to the best of my knowledge.

Signature: _____ Date: _____

St. Joseph Catholic School is non-discriminatory in its admissions policies and admits students of any race, color, and national or ethnic origin.

For Office use only: Date Received: _____ Amount Paid: _____ Check Number: _____