

**Bishop John King Mussio Central Elementary School
K-6 Registration Form**

Entering Grade _____ *Assigned Homeroom* _____

Student Name _____

(Last)

(First)

(Middle)

Address _____

(Street)

(City)

(State)

(ZipCode)

Home Phone Number _____ Family E-Mail Address _____

Birthdate _____ Gender _____ Social Security Number _____

Religion _____ Student's Parish _____

Sacraments Received:

Baptism (Church) _____ (City & State) _____ (Date) _____

First Communion (Church) _____ (City & State) _____ (Date) _____

Confirmation (Church) _____ (City & State) _____ (Date) _____

Public School **District** in which student resides _____

Name of Public School **Building** nearest student's home address _____

ETHNIC GROUP (Please select only one)

____ *American Indian/Alaskan Native* (person having origins in any of original peoples of N America and maintains cultural identification through tribal affiliation or community recognition)

____ *Asian* (person having origins in any one of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent)

____ *Hispanic* (persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race)

____ *Black, not Hispanic origin* (a person having origins in any of the Black racial groups of Africa)

____ *Native Hawaiian/Other Pacific Islander* (a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Island)

____ *Multiracial* (a person having origins in two or more racial/ethnic categories)

____ *White, not Hispanic origin* (a person having origins in any of the original peoples of Europe, North Africa or the Middle East)

School Previously Attended _____ Dates _____ Grade Completed _____

Father's Name _____ Occupation _____

(Last)

(First)

(Title)

Religion _____ Parish _____ Employer _____

Home Phone _____ Cell Phone _____ Work Phone _____

Mother's

Name _____ Occupation _____

(Last)

(First)

(Title)

(Maiden)

Religion _____ Parish _____ Employer _____

Home Phone _____ Cell Phone _____ Work Phone _____

Whom does student live with? (Please circle): Mother & Father, Mother only, Mother and Stepfather, Father only, Father & Stepmother, Guardian

Parent or Guardian Signature _____ Date _____

Copies Needed for complete registration:

____ Official Birth Certificate

____ Social Security Card

____ Baptism Certificate

____ \$40 Registration Fee for new families to BJKM

(Over please)

Sibling Information (Please list all siblings in the family)

Name	Age	Grade	School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The following information must be provided if the enrolling student ***lives with*** a guardian or stepparent:

Stepparent

Name _____
(Last) (First)

Home Phone _____ Work Phone _____ Cell Phone _____

Guardian

Name _____
(Last) (First)

Home Phone _____ Work Phone _____ Cell Phone _____