

Sacred Heart Catholic School

545 N Oak Street Reedsburg, Wisconsin 53959
Phone: 608-524-3611 Fax: 608-524-3831 Email: shs@rucls.net
Karen Marklein, Principal

For Office Use Only
Date Rec'd _____
Fee Rec'd _____

Registration Form—Sacred Heart Kindergarten 20__ - 20__

Today's Date: _____

Name: _____
Last First Middle Male Female

Date of Birth: ____ ____ ____ Place of Birth: _____
Month Day Year City State

Date of Baptism: ____ ____ ____ Place of Baptism: _____
Month Day Year City State

Parish: _____ Baptized by: _____

Are you a parish member of:

Sacred Heart _____ Holy Family _____ St. Boniface _____ St. Patrick _____ Other _____

If baptized in a parish other than Sacred Heart, please submit the Baptismal Certificate. It will be returned to you promptly.

For research & reporting to the DPI, please indicate ethnic category: Is your child Hispanic or Latina? Yes No
Select the racial category(s) that apply to your child (check all that are applicable):

- American Indian or Alaska Native – A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, e.g., Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American – A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”
- Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Father's Name: _____
Last First & Middle Religion Occupation

Mother's Name: _____
Last First & Middle Religion Occupation

Home Address: _____

Home Phone: _____ Emergency Phone: _____ Cell Phone: _____

Email Address: _____

Registration for kindergarten will begin on November 1st. Priority will be given to families in the following order: families with students currently attending SHS, pre-kindergarten students continuing on to kindergarten, new families that are active parish members, children of alumni, and general public. A confirmation letter will be sent to parents in May requesting a \$100 non-refundable kindergarten registration fee that will be deducted from the child's tuition. If it is not paid by June 1st, your child's name will be removed from the class list and placed at the bottom of the waiting list. Final enrollment will be determined by June 1st. After this date, openings will be filled by order of priority.

Were you referred to Sacred Heart Catholic School by another school family? Yes _____ No _____

If so, who? _____

***** A student must be 5 years of age by September 1, 2018. *****

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