



ST. JOSEPH SCHOOL

301 West Houston Street
Garrett, IN 46738
260-357-5137
stjosephgarrett.org

Registration 2016-2017

Parent(s) name(s): _____

Address: _____

Phone number(s): _____

E-mail: _____

Student's name	Shirt Size <small>(for those registered by March 4th, 2016)</small>	Grade Entering
----------------	--	----------------

Student's name	Shirt Size <small>(for those registered by March 4th, 2016)</small>	Grade Entering
----------------	--	----------------

Student's name	Shirt Size <small>(for those registered by March 4th, 2016)</small>	Grade Entering
----------------	--	----------------

Student's name	Shirt Size <small>(for those registered by March 4th, 2016)</small>	Grade Entering
----------------	--	----------------

Registration accepted in school office by: _____ Date: _____

****Students registered by March 4, 2016 will receive a St. Joseph Polo shirt in August.***