

ST. MARY CATHOLIC SCHOOL—Mayville, WI
2025-2026
3K, 4K, 5K, 1st, 2nd, 3rd & 4th Grade Registration Form*

Family Name: _____ Date: _____

Participating in Wisconsin Parental School Choice Program

Students registering in grades 3K - Gr. 3 for the 2025-2026 school year at St. Mary's: *(Please use LEGAL names.)* **Students must be 3 years old for 3K, 4 years old for 4K and 5 years old for 5K by 9/1/25 to enter school.** You must provide verification of birth date (**birth certificate**) with your registration. **3K students are expected to be toilet trained.** **Registration will not be accepted from families with outstanding tuition balances unless an approved payment plan is in place.*

Legal Last Name	Legal First Name	MI	Gender	Birthdate	Place of Birth	Grade

Father's Name: _____
 (Last) (First) (Middle)

Address: _____

City/State/Zip: _____

Place of Employment: _____
 (Name) (City)

Religion: _____

Parish: _____

School District: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

E-Mail: _____

Occupation: _____

Mother's Name: _____
 (Last) (First) (Middle)

Address: _____
 (if different from father)

City/State/Zip: _____

Place of Employment: _____
 (Name) (City)

Religion: _____

Parish: _____

School District: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

E-Mail: _____

Occupation: _____

Marital status: ___ Married ___ Divorced ___ Separated ___ Not Married

If divorced, separated or not married, who has custody of child(ren)?

___ Father ___ Mother ___ Joint ___ Other

(A copy of child custody or placement agreement must be attached if not already on file)

 If a current St. Mary's family has referred you to our school, please indicate that family here: _____

Parent Signature: _____

(Please remember to complete the reverse side.)

Please list other children under age 8 in family who are not attending St. Mary School: (List oldest first)

Last Name	First Name	Middle	Sex	Date of Birth

Please complete the following information or write N/A for Not Applicable:

School Transferring From: _____ School District: _____

City/State/Zip: _____

Baptismal Information:

Child's Name	Date	Church/Parish	City/State

Sacrament of Reconciliation Information:

Child's Name	Date	Church/Parish	City/State

First Holy Communion Information:

Child's Name	Date	Church/Parish	City/State

Registration: Registration is due by March 31, 2025. This is very important so that the school can determine staffing and supplies for the upcoming year.

FOR OFFICE USE ONLY:

Date Registration Form Received: _____ Received by: _____

Notes: _____
