



St. Joseph Catholic Church
1145 South Aspen Road
Pueblo, CO 81006
719-544-1886

KINDERGARTEN THRU 8TH GRADE
REGISTRATION 2025/2026

Parish where you are registered at: St. Joseph __ St. Therese __ Other __

Children's Information *** Please make sure to mark Sacraments received

Childs name: _____

DOB _____ Grade _____ 1st Year__ or 2nd Year__ Where _____

Baptism __ 1st Communion __ Reconciliation__

Allergies:

Childs name: _____

DOB _____ Grade _____ 1st Year__ or 2nd Year__ Where _____

Baptism __ 1st Communion __ Reconciliation__

Allergies:

Childs name: _____

DOB _____ Grade _____ 1st Year__ or 2nd Year__ Where _____

Baptism __ 1st Communion __ Reconciliation__

Allergies:

Childs name: _____

DOB _____ Grade _____ 1st Year__ or 2nd Year__ Where _____

Baptism __ 1st Communion __ Reconciliation__

Allergies:

Family Information (Address, City, Zip Code of the person who receives the mail)

Mother/Guardian: _____

Father/Guardian: _____

Mailing Address : _____

Phone Number: Mother _____ **Father** _____

Email address: _____

1. Emergency Contact: _____ **Phone #** _____

2. Emergency Contact: _____ **Phone #** _____

I give permission to St. Joseph Parish to use pictures on their website for informational or promotional purposes Yes _____ No _____.

REGISTRATION FEE: \$40.00 1 CHILD / \$60.00 2 CHILDREN / \$85.00 for 3 or more
Registration forms must be turned in to the office. Please make the checks payable to:
St. Joseph Parish. If you have any questions call the office at 719-544-1886 .

Please bring registration form to the office or drop in the collection basket.