



St. Joseph High School • 80 Willoughby Street • Brooklyn, NY 11201

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METROCARD REGISTRATION

Registration date: _____ Start date: _____

Please PRINT all information - -

Student's first name: _____ Last: _____

Parent/Guardian's Name: _____

Grade will be attending in St. Joseph H.S.: _____

Address: _____ Apt. # _____

_____ State _____ Zip Code _____

Home phone: _____ Birth date _____

Parent/Guardian's Cell # _____ E-mail _____

Name of current school _____

School location if not in New York: _____

Medical due: 5/30/17 Parent initials _____