



**St. Peter's Catholic School**  
 34 Main Street, PO Box 357  
 Hokah, MN 55941  
 (507) 894-4375 / www.stpetershokah.org

Office Use Only	
Date Received:	_____
Check #:	_____ Amt: _____
Cash:	_____ Init: _____

## 2026-27 Family Member Registration Form

\*\*\*\*\* **Legal Guardian #1 (Primary Contact)** \*\*\*\*\*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ Company: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Relationship to Child: \_\_\_\_\_

\*\*\*\*\* **Legal Guardian #2** \*\*\*\*\*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ Company: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Relationship to Child: \_\_\_\_\_

*(only enter if different than Legal Guardian #1)*

Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_

\*\*\*\*\* **Emergency Contact Person (all fields are required)** \*\*\*\*\*

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_

\*\*\*\*\* **Medical Information (all fields are required)** \*\*\*\*\*

Physician: \_\_\_\_\_ Dentist: \_\_\_\_\_  
 Address1: \_\_\_\_\_ Address1: \_\_\_\_\_  
 Address2: \_\_\_\_\_ Address2: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Clinic: \_\_\_\_\_ Clinic: \_\_\_\_\_



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## Children Registration Form

\*\*\*\*\*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: **M F** Entering Grade: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Allergies/Health Concerns: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: **M F** Entering Grade: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Allergies/Health Concerns: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: **M F** Entering Grade: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Allergies/Health Concerns: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: **M F** Entering Grade: \_\_\_\_\_  
Religion: \_\_\_\_\_  
Allergies/Health Concerns: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

### Authorized Person to Pick Up Children

Name/Phone: \_\_\_\_\_  
Name/Phone: \_\_\_\_\_  
Name/Phone: \_\_\_\_\_



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# Family Permissions Form

Family Name: \_\_\_\_\_

**Parent Agreement:** We agree to comply with all the rules and regulations as set forth by St. Peter's Catholic School. In addition, we agree to cooperate and assist the administration, faculty and staff in promoting the integrity of high spiritual, moral and academic standards set forth by St. Peter's Catholic School. We acknowledge that St. Peter's Catholic School reserves the right to cancel this application at any time for reasons of academic, moral and character deficiency as well as any actions detrimental to the Diocese of Winona-Rochester and St. Peter's Catholic School.

Yes  No

**Emergency Consent:** St. Peter's staff has permission to act in an emergency or when a parent can't be reached or is delayed.

Yes  No

**Use of Pictures Consent:** We would like your permission to use your child's picture in year-end mementos and promotional items such as slideshows, brochures, or our school website. We give permission for the use of photographs with my child's photo to be used in promotional brochures and school advertising.

Yes  No

**Standard/Full Civil Rights Statement:** In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

**Please view other side**



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**Emergency Early Dismissal Plan:** In the event of **unexpected** school closings (ex: weather change during the day or any other unexpected emergency), we need to know your child's emergency plans for early dismissal. **There will not be time for teachers to call parents and students will not be allowed to use the phone system**, so please be specific about where your child should go and how he/she is to get there.

In the event of early school closing, our children will go home by one of the following (pick one).....

Bus                      Walk                      Picked up by authorized person

***Please take a few minutes to discuss this plan with your child.***

**Parent Contact List (circle one):    Yes        No**

Please include our name, address, email, and cell phone in the St. Peter Parent Contact List (please contact the school office if you want to exclude any of this information). This report will be distributed to parents and allows parents to easily communicate for playdates, birthdays, etc.

**Registration Understanding:** We, the undersigned, upon acceptance of this application on the part of St. Peter's Catholic School, agree to comply with all the rules and regulations as set forth by St. Peter's Catholic School. In addition, we agree to cooperate and assist the administration, faculty and staff in promoting the integrity and high spiritual, moral and academic standards set forth by St. Peter's Catholic School. We acknowledge that St. Peter's Catholic School reserves the right to cancel this application at any time for reasons of academic, moral and character deficiency as well as any actions detrimental to the Diocese of Winona-Rochester, and the faculty, administration, staff, facilities and name of St. Peter's Catholic School.

Your registration is not complete until this section is signed, dated, and returned. Thank you

- We have included the \$50 non-refundable application fee (per family). This amount will be applied to your tuition if paid before the deadline. Exception...new families will be credited regardless.

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Parent Signature

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Date

- Please contact us to discuss tuition relief.



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## **ST. PETER'S SCHOOL INTERNET USE POLICY**

### PHILOSOPHY

We believe that to more effectively prepare our students for the future we must educate them in the use of the computer, computer terminology, and the associated hardware and software. Students must be confident in their ability to incorporate computer skills in all aspects of their education. We will strive to clearly communicate to the students the importance of the computer and how it affects our modern life. We will reinforce the ideas of the "computer age" while nurturing our students' Christian upbringing and overall value system.

### INTERNET ACCEPTABLE USE AND SAFETY POLICY

The purpose of this policy is to establish acceptable and safe use of the Internet, including electronic communications. All computers and technology equipment shall be used in a manner that is consistent with the mission and goals of St. Peter's Elementary School and the Diocese of Winona-Rochester. It also refers to personal or guest technology used on campus, at school or church sponsored events, or on field trips associated with the school. All students, staff, parents, and guest users shall abide by the procedures established by the implementation of this policy. Inappropriate use or intentional misuse of the computers or technology equipment may result in disciplinary or law enforcement action.

### USE OF SYSTEM

The use of the school system and access to use of the Internet is a privilege, not a right. Any violation of this policy is also considered a violation of the general school discipline code as stated in the Parent Student handbook or Faculty-Staff Handbook and is subject to the same disciplinary actions. The privileges of using the computer network, Internet access, or other means of technology can be suspended or revoked at any time.

### TECHNOLOGY RULES

1. Students may use the computer and especially the Internet only when a teacher gives permission and in a way that meets educational and Christian goals.
2. Students' and staff members' use of the computers, the Internet, and other technology devices is for school-related activities only. School-related activities of students are considered to be assignments or projects given and monitored by teachers.
3. Students and staff should be aware that any computer files, email, and Internet use on school computers or devices are NOT private. The school administration can access these files for maintenance or monitoring at any time. In addition, parents have the right, at any time, to review the content of their child's email or Internet history. Parents may terminate their child's access to the internet at any time.
4. Students and staff are to access only their own accounts and no one else's. Passwords are not to be shared with others.

*A family of learners trying to live like Jesus in our school, homes, and community.*



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5. Use of any type of social networking/social media websites (such as, but not limited to Facebook, Instagram, Twitter, etc.) is prohibited on network computers and guest computers using St. Peter's Internet.
6. Users are to treat all equipment with respect. If there are problems, do not attempt repairs on your own. Contact the principal or secretary.
7. Users may not write, send, download, or display anything considered obscene, threatening, or harassing, or harmful (messages or images). School equipment may not be used to make purchases or offer items for sale unless approved by administration. The school is not responsible for financial obligations resulting from unauthorized use of the Internet.
8. Students and staff are not to share personal information about themselves, friends, families, the school, or any other individual over the Internet. The exception to this is when used in pre-approved ways by staff members in communication with each other or parents and official posts to the school website.
9. Students using the Internet for research are to cite all sources using the bibliography or reference style adopted and taught by the teacher.
10. Parents are partners in keeping our students and our school Internet safe. Students and parents shall read this policy annually along with the Parent Student handbook before student use of the Internet at school is allowed. Parents may deny their child's Internet access if they wish, and an alternative means of completing assignments will be provided. Parents agree to give the same guidance to Internet use at home as it pertains to school activities as well as their children's use of personal electronic devices if brought to school for use. (Please see USE OF PERSONAL DEVICES section for more detail)
11. Staff shall sign and return a copy of this policy annually with their Staff Handbook. Teachers using Internet in their instruction shall recognize their responsibilities to educate minors on appropriate usage and online behavior. Teachers agree to monitor all Internet usage by students under their supervision.

Parent Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Children Signatures: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_



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## 2026-27 Field Trip Participation Parent Permission Form

Your children are eligible to participate in our Parish/School-sponsored activities. Some require transportation or walking to a location away from the premises. Please fill out this form to allow your children to participate in these field trips. This permission slip is to be filled out only once and shall remain in effect until the end of the school year. You will be notified of any field trips requiring transportation prior to the event.

In consideration of the opportunity for your child to participate and fully recognizing that such an undertaking involves an element of risk, you assume all risks and hazards incidental to such participation and do hereby release, absolve, indemnify and agree to hold harmless the Diocese of Winona-Rochester, Minnesota and St. Peter's Church and School of Hokah, its agents, employees and officers and the chaperones, leaders, organizers and sponsors and persons transporting our child to and/or from these activities.

I hereby consent to participation by my child/children for field trips. I further consent to the conditions stated above on participation in this event, including the method of transportation.

In the event of an emergency and I cannot be contacted, I hereby authorize that emergency treatment may be administered.

The following are special circumstances regarding my child you should be aware of:

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Children Names: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_





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## USE OF PERSONAL ELECTRONIC DEVICES

Personal Electronic Devices include, but are not limited to cell phones, iPods, tablets, mp3 players, electronic games, smart phones, etc. Use of these personal devices at school is a privilege, not a right.

Students are permitted to possess personal electronic devices on school property so long as the devices are not activated, used, displayed, or visible during the school day. From morning bell until dismissal bell, personal electronic devices must be powered off and stored in the basket on the teacher's desk.

Teachers and staff may have personal electronic devices at school for their personal use and Class Dojo as deemed appropriate by school administration. It is expected to place notifications on silent so as not to disturb the educational process during the school day.

### PROHIBITED USES

Personal electronic devices are not permitted to be brought to Mass by students. Staff may bring electronic devices to church if necessary, but the devices must be set to silent or powered off.

Students and staff may not use personal electronic devices at school or school-related events to view Internet sites that would otherwise be denied at school. Students and staff may not use personal electronic devices anywhere in the building where others would expect privacy, such as locker rooms, restrooms, and other areas where people have a reasonable expectation of privacy. School administration may designate other places where use is prohibited.

Students/staff are prohibited from using personal electronic devices to capture, record, store, send, or transmit the spoken word or visual images (e.g. audio, video, text, photos, etc.) of any person, including other students or staff, without prior permission from administration and/or parental permission.

### DISCIPLINE OR CONSEQUENCES

Students causing disruption by use of personal electronic devices, or using the device in a prohibited manner, will have their device taken away by the supervising teacher or staff until the end of that school day or after-school activity. If the student continues to use their device inappropriately, parents will be contacted to retrieve the device. Continued problems may result in that student being prohibited from bringing his/her device back to school.

A student's personal electronic device, when brought to school, may be searched when a school official has reasonable grounds for suspecting that the search will provide evidence that the student is using the device for cheating on an academic activity, has violated a law, has broken St. Peter's School Policies, is bullying/harassing another person, or any other situation which could result in severe disciplinary actions.

### LIABILITY

A student or staff member is personally and solely responsible for the security of their own electronic device. The school and its employees are not responsible for the theft, loss, or damage of said device.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Children Names:** \_\_\_\_\_





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REQUEST FORM FOR **TEXTBOOKS**, STANDARDIZED TESTS, AND  
INDIVIDUAL INSTRUCTIONAL MATERIALS

**School Year Ending June 2027**

The State of Minnesota has authorized local public school districts to loan textbooks, standardized tests, and individualized instructional materials to pupils attending a nonpublic school, (includes home schools), established and operating within the school district boundaries. These materials must be secular in nature, designed primarily for individual use by the pupil in a particular class or program in the school the pupil regularly attends, and must be requested by, or on behalf of, the pupil **no later than SEPTEMBER 15, 2026**.

Please indicate, by placing an "X" in the appropriate box below, whether or not you request these items this school year.

Pupil's Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Name of School: St. Peter's Catholic School

I do request that textbooks, standardized tests, and individualized instructional materials be provided on loan to the above pupil this school year.

I do not wish to request the loan of any materials this school year.

**Verification of Use:** I hereby verify that the textbooks and individualized instructional material requested are to be used by the pupil named above in a course of instruction in that pupil's elementary or secondary school.

\_\_\_\_\_  
Signature of Pupil, Parent, or Guardian

\_\_\_\_\_  
Date





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### REQUEST FORM FOR DISTRICT PUPIL HEALTH SERVICES

#### School Year Ending June 2027

The State of Minnesota has authorized local public school districts to allow pupils attending a nonpublic school, (includes home schools), established and operating within the school district boundaries, access to the existing district Pupil Health Services program. These services must be requested by, or on behalf of, the pupil **no later than SEPTEMBER 15, 2026**.

Please indicate, by placing an "X" in the appropriate box below, whether or not you request these items this school year.

Pupil's Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Name of School: St. Peter's Catholic School

I do request that the district's Pupil Health Services program be made available to the above pupil this school year.

I do not wish to request Pupil Health Services this school year.

\_\_\_\_\_  
Signature of Pupil, Parent, or Guardian

\_\_\_\_\_  
Date





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### REQUEST FORM FOR DISTRICT SECONDARY (5th-8th Graders ONLY) **GUIDANCE/COUNSELING SERVICES**

**School Year Ending June 2027**

The State of Minnesota has authorized local public school districts to allow pupils attending a nonpublic school, (includes home schools), established and operating within the school district boundaries, access to the existing district Secondary Pupil Guidance and Counseling Services program. These services must be requested by, or on behalf of, the pupil **no later than SEPTEMBER 15, 2026**.

Please indicate, by placing an "X" in the appropriate box below, whether or not you request these items this school year.

Pupil's Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Name of School: St. Peter's Catholic School

I do request that the district's Secondary Pupil Guidance and Counseling Services program be made available to the above pupil this school year.

I do not wish to request Secondary Pupil Guidance and Counseling Services this school year.

\_\_\_\_\_  
Signature of Pupil, Parent, or Guardian

\_\_\_\_\_  
Date





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### Time and Talent Commitment

As a small school, *we need and expect every family to participate in all fundraisers and events* as much as possible. Please sign up to help with as many of the following events as you can **(at least three)**:

- KC Marathon (September)
- Roast beef dinner (second Saturday of October)
- Extravaganza (usually April)
- Playground/lunch supervision (11:30 to 12:30 any day)
- Mailing helper (fold, sort, stuff)
- KC Breakfasts (usually two during the winter)
- KC Fish Fry's (usually two during Lent)
- Welcome/host family (bring a school pie to new family and call them in August to see if questions)
- Classroom helper
- Receptionist/secretary
- Maintenance help
- Refreshments at events (Open Houses, concerts)
- Sell scrip (at events or on Sundays)
- Library help (Wed. am)
- 3K helper (Tuesday/Thursday mornings)
- 4K helper (Monday-Friday any time)
- Music (piano, guitar, choir)
- Marketing

**Many Hands Make Light Work. Thank you!**

*A family of learners trying to live like Jesus in our school, homes, and community.*





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## 2026-27 Authorization Agreement for Direct Payments (ACH Debits)

I (we) hereby authorize St. Peter Elementary School to initiate debit entries to my (circle one).....

Checking Account (attach voided check)

Savings Account (attach deposit slip)

as indicated below, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

### Tuition

10 monthly installments starting September 1 and ending on June 1

4 installments on Sept 1, Dec 1, Mar 1, June 1

1 annual installment on September 1

### Extracurricular Activities

I give authorization for St. Peter School to withdraw extracurricular fees on an as needed basis with prior notification.

Yes

No

### Field Trip Fee, Supply Fee, and Technology Fee

I give authorization for St. Peter School to withdraw these fees on Sept 1.

Yes

No

Depository Name: \_\_\_\_\_ Start Date: \_\_\_\_\_

Routing Number (9 Digits): \_\_\_\_\_ Account Number: \_\_\_\_\_

This authorization is to remain in full force and effect until St. Peter Elementary School has received written notification within 2 weeks of its termination as to afford St. Peter Elementary School and Depository Financial Institution a reasonable opportunity to act upon it.

Signature

Printed Name

Date

\_\_\_\_\_  
 Email Address to Receive Notifications

**Office use only**

ACH Termination Date: \_\_\_\_\_

Initials: \_\_\_\_\_





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# Registration Check List

The following forms need to be completed to be qualified as a completed registration packet.

- \_\_\_\_\_ Family Member Registration Form
- \_\_\_\_\_ Children Registration Form
- \_\_\_\_\_ Family Permissions Form
- \_\_\_\_\_ Internet Policy Form
- \_\_\_\_\_ Field Trip Permission Form
- \_\_\_\_\_ Use of Personal Electronic Devices Form
- \_\_\_\_\_ Textbook Form
- \_\_\_\_\_ Health Services Form
- \_\_\_\_\_ Guidance Counseling Services (only 5<sup>th</sup> – 8<sup>th</sup> graders)
- \_\_\_\_\_ Time and Talent Commitment Form
- \_\_\_\_\_ ACH Form (optional)

Please include the following checks with your registration packet.

- \_\_\_\_\_ \$50.00 non-refundable check that will be applied to your tuition

Please give completed forms and payments to the school office to be qualified as a completed registration packet.