

PARISH VERIFICATION FORM

TO BE COMPLETED BY FAMILIES REGISTERING FOR THE CATHOLIC RATE

FAMILIES MUST COMPLETE THE TOP SECTION AND SIGN BELOW BEFORE SUBMITTING DIRECTLY TO THEIR PARISH OFFICE. THIS FORM MUST BE RETURNED AND SIGNED BY YOUR PASTOR IN ORDER TO QUALIFY FOR THE CATHOLIC RATE AND/OR TUITION ASSISTANCE.

Parishioner's Last Name: _____

Relationship to student: _____

Mother's Full Name: _____

Father's Full Name: _____

Student's Name: 1) _____

3) _____

2) _____

4) _____

Street/City/Zip: _____

Phone: _____

Parish Envelope #: _____

⊕ WHERE KNOWLEDGE & FAITH MEET ⊕

2018-2019 School Year

I am a registered, active, and supporting member of _____ Parish, and am willing to meet with the Pastor about my status, if necessary.

Parishioner Signature

Date

The above family is considered a registered, active, and supporting member of
___ St. Anthony of Padua Parish ___ St. Philip Parish ___ Other _____

Pastor's Signature

Date