

**2011 – 2012**  
**Saint Joseph Catholic School**  
**PARISH SUBSIDY PARTICIPATION FORM**

**DATE OF SCHOOL REGISTRATION** \_\_\_\_\_

**New Family / Returning Family**  
 (Please circle one of the above)

**St. Joseph Catholic Church- Anderson**

This document must be given to and signed by your Catholic Pastor for you to qualify for parishioner tuition rate for the 2011-2012 school year. If the tuition subsidy is awarded, this form will be returned to the school by your pastor and you will be notified of the reduction in your school tuition.

If the tuition subsidy is not awarded, this form will be returned to you and you will pay the standard rate.

**By submitting this form you agree that this tuition rate for St. Joseph Parishioners is contingent on meeting the following criteria:**

1. *Registered Member of the parish.*
2. *Regularly attending Sunday Mass.*
3. *Support of Parish through reportable income (offertory envelope or personal check).*

NAME AND GRADE OF STUDENTS REGISTERED FOR 2011- 2012 SCHOOL YEAR

1. _____	GRADE _____	4. _____	GRADE _____
2. _____	GRADE _____	5. _____	GRADE _____
3. _____	GRADE _____	6. _____	GRADE _____

FAMILY LAST NAME PARISH ENVELOPE NUMBER

\_\_\_\_\_  
 HOME PHONE NUMBER/ ADDITIONAL PHONE NUMBER

\_\_\_\_\_  
 HOME ADDRESS/CITY ZIP

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**CATHOLIC PARENTS' AND STUDENTS' CHURCH AFFILIATION**

I hereby verify that this family is an active member of this parish and I have approved the Parishioner Rate at the school for the 2011-2012 school year.

SIGNATURE OF PASTOR: \_\_\_\_\_

DATE \_\_\_\_\_

\_\_\_\_\_  
 (Office Use)

Received \_\_\_\_\_ Letter Sent \_\_\_\_\_