

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

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

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

**PARISH** \_\_\_\_\_

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 is contingent on meeting the criteria set forth by your pastor.**

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 \_\_\_\_\_ parish and I have approved the \$1160 PER CHILD PARISH SUBSIDY at the above school for the 2011-2012 school year. Our parish will pay the subsidy for coming year to St. Joseph School on a (check one) \_\_\_ yearly, \_\_\_ quarterly, \_\_\_ monthly basis.

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

DATE \_\_\_\_\_

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

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