

Date of Parish Registration \_\_\_\_\_

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

**2017-2018**  
**Saint Mary Catholic School**  
**Saint Mary Parish Participation Form *Returning***  
***Families must complete by April 1, 2017***

Received by: \_\_\_\_\_

Date Church Office \_\_\_\_\_

Rec'd \_\_\_\_\_

**FAMILY LAST NAME** \_\_\_\_\_

**Did you receive parish tuition subsidy last year?** (Please circle) **Yes or No** **Amount \$**

**Do you receive any other tuition subsidy?** (Please circle) **Yes or No** **Amount \$**

*This document must be given to and signed by the Pastor for you to qualify for up to \$800 per student tuition subsidy for the 2017-2018 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 no further reduction will be given in your tuition rate. All parish subsidy awarded by September 1, 2017.*

By submitting this form you agree that this tuition subsidy is contingent on meeting the following criteria:

1. Registered and participating members of the parish.
2. All family members **regularly attend Sunday Mass.** (Only turning in contributions to office – not acceptable)
3. Support of Parish through **reportable income** (offertory envelope or personal check minimum of \$16 per week). Financial report attached to this form.
4. Involved by your time and talent to the various ministries and organizations within the parish.
5. Participate in the Catholic Sharing Appeal (CSA). ( For the 2016 year \$10.00 a month minimum)
6. Participate in the Parish Life Center support. (2016-17 - \$10.00 a month minimum)

**REPORTABLE PARISH SUPPORT—2016**

*PLEASE PLACE BELOW WHAT YOUR RECORDS SHOW FOR THESE THREE AREAS  
VERIFICATION FROM YOUR ATTACHED YEAR END FINANCIAL STATEMENTS.*

Offertory	CSA	Parish Life Center
\$	\$	\$
<i>\$16.00 weekly minimum</i>	<i>\$10.00 monthly minimum</i>	<i>\$10.00 monthly minimum</i>
Based on your finances – amount of parish subsidy requested... \$ _____ /per child or \$ _____ <b>total requested</b>		

NAME AND GRADE OF STUDENTS REGISTERED FOR 2017-2018 SCHOOL YEAR - (Kindergarten thru 8<sup>th</sup> Grade):

1. \_\_\_\_\_ GRADE \_\_\_\_\_      3. \_\_\_\_\_ GRADE \_\_\_\_\_  
 2. \_\_\_\_\_ GRADE \_\_\_\_\_      4. \_\_\_\_\_ GRADE \_\_\_\_\_

FAMILY LAST NAME	ADDRESS
PARENTS' NAMES	CITY ZIP
CONTACT PHONE NUMBER	PARISH ENVELOPE NUMBER

*Parish to Complete*

I hereby verify that the above Family is an active member of St. Mary Parish and I have approved **PARISH SUBSIDY** at the rate indicated in the box to the right for the 2017-2018 school year. A review of this subsidy will again be made in October. At that time, I can invoke a non-subsidized rate upon this family if they do not follow the standards established by this parish. If this happens, I as pastor will notify the school and family. Subsidy paid to school by April 1, 2018.

Number of Children	_____
Subsidy per child	_____
<b>Total Subsidy</b>	_____

\_\_\_\_\_  
Signature of Pastor

DATE \_\_\_\_\_ St. Mary Parish

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

Verify #1 \_\_\_\_\_ Verify #2 \_\_\_\_\_