



Parish Affiliation Form
Family Acknowledgment Form
*Required for Families Seeking Catholic Subsidy**
2025-2026 School Year

Due to your Parish by April 1, 2025

Family Information:

PARISH NAME _____

FAMILY NAME LAST FATHER MOTHER

STREET CITY STATE ZIP

HOME PHONE WORK PHONE CELL PHONE

Name, ages, & grades of children attending St. Helen Catholic School:

1. _____

FIRST NAME AGE GRADE

2. _____

FIRST NAME AGE GRADE

3. _____

FIRST NAME AGE GRADE

4. _____

FIRST NAME AGE GRADE

Catholic Subsidy is applied only when this **Family Acknowledgment Form** is presented and signed by the Pastor/Administrator.

SIGNATURE- CATHOLIC PARENT/GUARDIAN DATE

PRINT NAMES ENVELOPE NUMBER

Pastor's Acknowledgment:

Parishes without schools will contribute, as support to the school, an amount equal to one half of the Catholic parishioner rate for one child, per each registered, active and supporting family with children attending that school.

As Pastor/Administrator of _____ Parish,
_____ I verify that the above-named family are registered, active, and supporting Catholics in my parish.

_____ I do not verify that the above-named family are active, supporting members in my parish.

PASTOR/ADMINISTRATOR SIGNATURE DATE