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Policy for Parish Subsidy

The following policy applies to families seeking Parish Subsidy for Catholic Central Elementary or Junior High School students. Parish subsidy for the _____ - _____ academic year is \$1400 for K-6th grade students, and \$1200 for 7th and 8th grade students. **PLEASE NOTE: DEADLINE to renew your subsidy is April 30th. If you are renewing, this form MUST be turned into the PARISH OFFICE BEFORE end of business April 30th. Otherwise your subsidy will be forfeited for the school year.**

To receive Parish Subsidy, parent/guardian must meet the following requirements on a continuous basis.

1. The family must be currently registered at St. Joseph or St. Raphael Church.
2. The family must regularly and frequently fulfill the mass attendance requirements for Sundays and Holydays of Obligation. Contribution envelopes must be placed in the collection basket during Mass, in order to verify attendance, even if the envelope is empty. The following will not be accepted as verification of mass attendance:
 - Cash contributions without a verifying envelope.
 - Electronic contributions without a verifying envelope.
 - Envelopes or contributions that are mailed or hand delivered to the Parish Office.
3. The family should give meaningful financial support to the parish. A minimum \$10.00 weekly donation is suggested, but is not required.
4. The family should give some time and talent for the good of the parish.

Student and Parent/Guardian Information

Church where family is registered _____ Email address _____

Parent/Guardian full name _____ Phone _____

K - 8 Students enrolling at Catholic Central (do not list high school students)

Student's first and last name _____ Grade Entering _____

Student's first and last name _____ Grade Entering _____

Student's first and last name _____ Grade Entering _____

I, the undersigned parent/guardian of the student(s) listed above, do hereby affirm that I have read, understand, and agree to the conditions set forth in the Policy for Parish Subsidy above.

Parent/Guardian Signature: _____ Date: _____

Office use only:

Approved by: _____ Title: _____ Date: _____