

**St. James Parish
Our Lady of the Valley Parish
St. Benedict's Parish**

Pastor's Reference Form

APPLICATION FOR 2017 – 2018 PARISHIONER RATE

TO BE COMPLETED BY APPLICANT:

Parish: _____ Parent's Names: _____ Envelope # _____

Address: _____ Phone number: _____
house no. street city postal code

Email Address: _____

| | | | | |
|-----------------------|--------------|----------------|-----------------------|---------------------|
| Student's name: _____ | Grade: _____ | (Baptism _____ | First Communion _____ | Confirmation _____) |
| _____ | Grade: _____ | (Baptism _____ | First Communion _____ | Confirmation _____) |
| _____ | Grade: _____ | (Baptism _____ | First Communion _____ | Confirmation _____) |
| _____ | Grade: _____ | (Baptism _____ | First Communion _____ | Confirmation _____) |

TO BE COMPLETED BY THE FAMILY'S PASTOR: *The Pastor's signature indicates the family qualifies for the parish supporter rate at St. James School for the 2017 – 2018 school year.*

Pastor's Comments:

Pastor's Signature: _____ **Date:** _____

**PLEASE SUBMIT THIS DOCUMENT TO THE SCHOOL ALONG WITH YOUR ST. JAMES SCHOOL REGISTRATION
OR RE-REGISTRATION**