



Parent/Guardian Name:

VERIFICATION OF PARISHIONER STATUS
2026-2027 School Year
K5 – 8th grade only

Child's First Name	Child's Last Name

I hereby certify that the Parent/Guardian name appearing above is a registered, active parishioner of:

 (Name of Parish)

 (City)

My family is non-Catholic and, therefore, I do not need to acquire the seal below. **Please skip to signature**

Yes, I am on my parish mailing list (Census Form on file with church)

Yes, I attend Mass and receive the Sacraments on a regular basis.

Yes, I participate in parish activities.

Yes, I contribute to the support of the parish as my means allow.

Yes, in meeting the requirements of the Diocese, request the parishioner tuition rate for my child(ren).

Yes, I understand that to receive the Catholic Tuition Rate, I MUST acquire the seal of my parish below and return this form with my enrollment packet. Otherwise, I will be charged the non-Catholic Rate, until this sealed form is returned.

If you're a member of Seven Sorrows, we can do this part for you

Signature: _____ Date: _____

PASTOR/PARISH VERIFICATION:

_____ verifies that the above-named family are a registered, active member of:

 (Name of Pastor/Representative)

 (Name of Parish)

 (City)

Date: _____

Parish Seal Here