

All Saints Catholic School

Parish Affiliation Form 2018 – 2019

Family Name _____

Please complete this form before bringing it to your parish for your Pastor's signature. *All families are required to complete this form annually.*

| | Address | | | |
|---|------------|--|---|---------|
| | Phone | | | |
| and a particip Basically, a "p 1. 2. 3. 4. | | parish. All parishes in the one who: kend Mass in their paries in their parisheir parisheir parisheir parishwith Catholic teaching | at least one parent must be Diocese of Bridgeport an sh with their children | |
| Stude | nt's Names | | 2018 – 2019 Grade | |
| The Fam | | nily is a participating member of | | Parish. |
| –––––– Pastor's Signatu | re | | | |