



# HTCS/OLA



## ACTIVE CATHOLIC TUITION SUBSIDY REQUEST 2024-2025

If you are seeking the Catholic Subsidy Tuition rate turn in this form with registration not later than\*

**NOTE: Your Pastor must sign this form, and he may request a meeting with you. Additionally, he may require up to a six-month period of accountable weekly mass attendance in order to sign this form.**

Name of Parish: \_\_\_\_\_

Are you a registered member of this parish? \_\_\_\_\_ Note: If not, you need to register now.

Do you use parish envelopes? \_\_\_\_\_ Direct Debit? \_\_\_\_\_

How many **Sundays** per year do you and your children attend this parish? \_\_\_\_\_  
(Please give the approximate number e.g. 52, 45, 30).

I certify that the above information is true and accurate and I understand that my status as an “Active Catholic” will be evaluated by the parish staff.

Father/Mother/Guardian \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Child(ren)	Grade
_____	_____
_____	_____
_____	_____

Parish use:

I certify that members of the above family are registered at \_\_\_\_\_ parish and attend Mass as they have testified above and are eligible for Active Catholic Tuition Subsidy.

Pastor’s Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Needs base Tuition assistance requires a FACTS financial assistance application.for grant & aid.