



HTCS/OLA



ACTIVE CATHOLIC TUITION SUBSIDY REQUEST 2025-2026

If you are seeking the Catholic Subsidy Tuition rate turn in this form with registration not later than May 1, 2025.

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. **See List on back of this form for opportunities to participate in my parish.**

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 _____

***If seeing Needs base Tuition assistance you are required to complete a FACTS financial assistance application for grant & aid.**