

VERIFICATION OF PARISH AFFILIATION CARDINAL MOONEY CATHOLIC HIGH SCHOOL

This form must be completed and returned to CMCHS in order to receive the Catholic Allowance.

DATE _____

STUDENT'S NAME _____ GRADE _____

_____ GRADE _____

_____ GRADE _____

PARENT NAME _____

ADDRESS _____

TELEPHONE _____

NAME OF CATHOLIC PARISH _____

Envelope Number _____ What Mass do you usually attend _____

Do you volunteer in a Parish Ministry? No ___ Yes ___ Which Ministry? _____

The above family is an affiliated member of our parish faith community, and should be afforded any privileges accordingly.

(Pastor's or delegate's signature)

Cardinal Mooney Catholic High School
4171 Fruitville Road
Sarasota, FL 34232
941-371-4917
(Fax) 941-371-6924