



**STEWARDSHIP VERIFICATION
FORMS ARE DUE BY FEBRUARY 16, 2019**

DEAR PARENTS,

Your home parish is being asked to contribute the amount needed for Stewardship Discounts distributed by All Saints School. Because of this, we ask that you submit this form to your home parish. If approved by a parish, other than All Saints or St Martins, you will be billed at the Catholic Discount rate. Once we receive funds from your home parish you will receive a credit directly to your tuition account. This monetary support comes from the generous donations made to your Parish through Stewardship of Time, Talent and Treasure. It is for this reason that we ask that all those requesting this Stewardship Rate assure their own involvement in their Parish in the following ways:

- 1. We are registered members of _____ Catholic Parish.**
- 2. Stewardship of Time and Talent:** We regularly participate in Sunday Eucharist and other liturgies and we are involved in the life and ministry of our parish.

We Attend Saturday / Sunday Mass

- Regular weekly
- Inconsistent
- Seldom
- Rarely, if ever

Mass Time _____

We Volunteer in a Parish Ministry

- Actively involved
- Somewhat involved
- Seldom involved
- Rarely, if ever involved

We Take Part in the Parish Activities

- Actively involved
- Somewhat involved
- Seldom involved
- Rarely, if ever involved

We are most active in the following parish ministries/activities (Please List at least one)

- 3. Stewardship of Treasure:** We demonstrate financial support of the parish through participation in the Parish Stewardship Program by submitting an annual commitment card and by making a good faith effort to fulfill that commitment through regular contributions.

- We have pledged \$ _____ for Parish Stewardship 2018.
- We make our contributions to meet that commitment with:
 Sunday Envelopes EFT Credit Card payments through the parish website

Please consider my request for stewardship verification in the areas listed above.

Parent Signature: _____

Student Name(s):	Parent Name(s)
Address:	
Phone Number:	
Email Address:	

PARENTS: Parish members need to be registered, active and contributing in the parish for 6 months before being considered for subsidy and this form must be submitted to the School Office.

DEAR PASTOR, PRIEST ADMINISTRATOR OR PASTORAL COORDINATOR, (Or Delegate)

The family listed above has registered their child at All Saints Catholic School and is requesting the Catholic Stewardship Rate. Please verify that this family is active in your Parish and let us know how much your parish will contribute toward this discount. We will send you a list of families that you have approved in the fall along with your invoice for the amount you have committed to.

- Our Parish will commit \$ _____ per student in Stewardship Discount for the above family.
- Our Parish will not commit funds for the above family as Stewardship Discount for their Catholic Education.

Pastor Signature _____ Date _____

Your Parish will be invoiced for the amount that you have committed in Stewardship Discount for the 2019-2020 School Year.