

IMMACULATE CONCEPTION SCHOOL — PARISH SUBSIDY  
 DUE: DECEMBER 31, 2019 (TO CHURCH OFFICE)                      FOR SCHOOL YEAR (SY) 2020-2021

In requesting the parish subsidy for my child/children to attend Immaculate Conception School, I agree:  
 (1) to attend Mass faithfully in my parish                      (2) to actively support my parish community to the best of my ability  
 (3) to use the parish envelope system                              (4) to pledge annually to my Parish and honor my pledge

Parent Name: (please print) \_\_\_\_\_

Address: \_\_\_\_\_

Parent Signature \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade (SY) 20-21 \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade (SY) 20-21 \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade (SY) 20-21 \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade (SY) 20-21 \_\_\_\_\_

Tuition Status:

\_\_\_\_\_ We are registered members of Immaculate Conception and fulfilled the subsidy card policy for calendar year 2018 and therefore qualify as a contributing household. We request a subsidy from the parish.

\_\_\_\_\_ We are new members of Immaculate Conception Catholic Church. ***We will send this card to our prior Parish for the Pastor's signature.*** We agree to pay the difference between the subsidies paid to Immaculate Conception Catholic Church by our prior Parish. We understand the amount of subsidy paid by our prior Parish is subtracted from the **non-contributing tuition price.** Questions please call (931) 645-6275 ext 106.

\_\_\_\_\_ We are contributing members of another Catholic Church. ***We will send this card to our Parish for the Pastor's signature.*** We agree to pay the difference between the subsidies paid to Immaculate Conception Catholic Church by our church. We understand the amount of subsidy paid by our church is subtracted from the **non-contributing tuition price.** Questions please call (931) 645-6275 ext 106.

**Immaculate Conception Church Office Use Only**

Date returned to ICS \_\_\_\_\_

Subsidy approved for School year 2020 – 2021                      YES    signature required below                      NO

Pastor or Delegate signature \_\_\_\_\_ Date \_\_\_\_\_

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Envelope # \_\_\_\_\_ Date Registered \_\_\_\_\_

2019 Pledge \$ \_\_\_\_\_ 2019 amount paid \$ \_\_\_\_\_ Balance \$ \_\_\_\_\_ % \_\_\_\_\_

Pledged for 2020                      Yes                      or                      No