



Our Lady of the Angels School
404 Cherry Street, Columbia, PA 17512
717-684-2433 + Fax 717-684-5039
www.ourladyoftheangels.org

Parish Verification Form

For admission into Our Lady of the Angels School 2017-2018

Submit to the parish in which your family is registered. Do NOT return this form to the school office.
St. Peter and Holy Trinity parishioners are NOT required to complete this form.

Active Catholic families are defined as registered members of a Catholic parish who worship regularly and contribute time, talent and treasure for the support of the parish. Any discussion regarding eligibility as a participating parish member must take place between you and the parish.

To be completed by Family

Full Name of Parent/Guardian:		
Address:	City/Zip:	Phone:
Name of Parish:	City/Zip:	Phone:

Please list the names of your child/ren who will be attending Our Lady of the Angels for 2016-2017 school year. Write the grade they will be in as of August 2017. Include their last name if different from your own.

Name:	Grade:
Name:	Grade:
Name:	Grade:
Name:	Grade:

The following information is held in the strictest confidence. Please be as specific as possible.

Time & Talent: Identify the ministries with which your family is involved:

Treasure: Our family contributes: weekly monthly other _____
Contributions are made: by envelope by check other _____

To Be Completed by Parish Office Only

This family is is not registered at _____ Parish.

Based on the commitment of Time, Talent & Treasure, this family is considered to be:

An Active Catholic Family A Non-active Catholic Family Not a Catholic Family

Pastor's Comments: _____

Signature of Pastor: _____ Date: _____



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