

**ARCHDIOCESAN PARISH VERIFICATION FORM
2019-2020**

The Archdiocese of Atlanta defines "active parishioners" as those registered and worshipping members (i.e., who attend mass weekly) and contribute of their time, talent, and financial resources to suppose the Parish. Active memberships is to be determined by the parish in which the family is a member.

PLEASE PRINT:

Parents/Guardians Name _____ Home Phone _____

Work Number _____ Cell Phone _____

Street Address _____ City/State _____ Zip Code _____

Name of Parish _____ Date Registered _____

Our family has a stewardship pledge on file with the parish this year: ___ Yes ___ No

Our family participates in this year's Archbishop's Annual Appeal: ___ Yes ___ No

Please list ALL students **planning** to attend **St. Peter Claver regional catholic** School for the 2019-20 school year even if acceptance has not been finalized. List the students' first and last names and the grade they will be entering.

Name _____ Grade in 2019-20 _____
First and Last Name

Name _____ Grade in 2019-20 _____
First and Last Name

Name _____ Grade in 2019-20 _____
First and Last Name

**The information on this page is held in the strictest confidence. Please be as specific as possible.
Attach additional sheets if needed.**

We attend Mass: Regularly Frequently Infrequently Never

We are not Catholic but attend services at: _____
Church Name Phone No.

Address

STEWARDSHIP OF TIME AND TALENT

Please list the ways that you and/or your spouse and children are involved in the ministries and activities of *your parish*.

We would like more information on volunteering at the parish: Yes ___ No ___

Please list the volunteer activities in which you have participated at School/Pre-School:

STEWARDSHIP OF TREASURE

Contributions are made to the Parish: Weekly ___ Monthly ___ Other (Please Specify) ___

Method of Contributions: Envelope ___ Check ___ Cash ___ Electronic ___

NOTE: Cash contributions should be placed in parish offertory envelopes. Unfortunately, loose cash cannot be identified as yours and, therefore, will not count toward verification.

*** New Families Only**

Please indicate your child/children's religious education involvement.

Signature of Parent/Guardian _____ Date _____

For Parish Office Use Only:

This family is registered at _____ Parish.

This family is not registered at _____ Parish.

Based on the commitment of Time, Talent and Treasure, this family is considered:

___ Active Catholic Family ___ Non-active Catholic Family ___ Not a Catholic Family

Pastor's comments to support this designation: _____

Pastor's signature: _____ Date _____

Parish Office Please Return to:

St. Peter Claver Regional Catholic School
Admissions Office
2560 Tilson Rd. / Decatur, GA 30047
P:404-241-3063 F: 404-241-3082
Admissions@spc-school.org



ST. PETER
REGIONAL CATHOLIC SCHOOL
CLAVER