

**Summerville Catholic School  
226 Black Oak Boulevard  
Summerville, SC 29485**

**Parishioner Rate Verification Form**

**Family Information** *(to be completed by parents)*

Father's Name:	_____		
	Last	First	
Mother's Name:	_____		
	Last	First	
Address:	_____ _____		
Telephone:	_____		
Children:			
	_____	_____	_____
	Name (Last, First)	Age	Grade
	_____	_____	_____
	Name (Last, First)	Age	Grade
	_____	_____	_____
	Name (Last, First)	Age	Grade
	_____	_____	_____
	Name (Last, First)	Age	Grade

**Parish Information** *(to be completed by church office)*

<b>Because this family is registered at our parish, where they are active members and practicing stewards, Summerville Catholic School will receive a monthly subsidy/support for the school tuition of the children listed.</b>	
_____	<b>St. John the Beloved Church</b> , 28 Sumter Avenue, Summerville, C, 29483
_____	<b>St. Theresa the Little Flower</b> , 11001 Dorchester Rd., Summerville, SC 29485
_____	<b>St. Thomas the Apostle</b> , 6650 Dorchester Rd., North Charleston, SC 29418
_____	<b>Immaculate Conception</b> , 510 St. James Ave., Goose Creek, SC 29445
_____	<b>St. Ann at Santee</b> , PO Box 250, Santee, SC 29142
_____	<b>St. Anthony</b> , 925 South Jefferies Blvd., Walterboro, SC 29488
Parish registration date: _____	
ID/Envelope# _____	
_____	_____
Authorized Signature (Church Office)	Date