

St. Thomas Aquinas Catholic School
1719 Post Road Fairfield, CT 06824
Fax (203) 255-0596 Phone (203) 255-0556

Parish Affiliation Form

_____ - _____ School Year

Family Last Name: _____

Address: _____

Phone: _____

Please Note : In order to qualify for the Parish Tuition Rate at least one parent must be a Catholic, a member of a Diocese of Bridgeport Roman Catholic Parish, and supporting his or her parish through weekly use of the parish envelope system. The option of granting the parish tuition rate is solely at the discretion of the Pastor based on his criteria with regard to "good standing." All parishes in the Diocese of Bridgeport - Fairfield, Trumbull, Easton, Bridgeport, Westport, Wilton, Norwalk, Stamford, Greenwich, Ridgefield, Danbury, Monroe, Stratford, Shelton, New Canaan are included.

I am NOT a member of a **Diocese of Bridgeport Roman Catholic Parish.**

Name of Parish you attend _____

City/Town _____

Are you a registered member of your parish? Yes ____ No ____ Envelope Number _____

Please obtain your pastor's signature and return this form to the school office.

** ONLY Members of St. Thomas Aquinas Parish may send in this form without the pastor's signature and the school office will request the signature.*

Pastor's Signature of Approval _____ Date: _____