

SAINT BERNARD SCHOOL
1593 Norwich New London Turnpike
Uncasville, CT 06382-1399

PARISH AFFILIATION FORM

(This completed form must be returned to the Business Office in order for tuition to be billed at the Catholic rate.)

Parent(s)/Guardian Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Student Names:

_____ Class of: 20_____

_____ Class of: 20_____

_____ Class of: 20_____

Family is registered at _____ Parish.

Parish Address: _____

City: _____ State: _____ Zip: _____

Parish Office Telephone: _____

(Parent/Guardian --- Please forward this form to you Pastor for verification/acceptance)

(Pastor: Please complete the section below and return this form to St. Bernard High School)

The above named family is registered in your parish: _____ yes _____ no

The members of the above named family are participating members of your parish:
_____ yes _____ no

Pastor Signature: _____ Date: _____

Return to: Saint Bernard School
Business Office
1593 Norwich-New London Tpke.
Uncasville, CT 06382-1399