

Parent Participation Program 2018 — 2019				
Family Name:	Student Names:			
Mother's First Name:	Phone:		Cell:	
Father's First Name:	Phone:		Cell:	
 What is required? Participation of 20 hours per year for each family Choose your desired participation level and attach St. Ann's Academy, dated September 1, 2018 o Please note we will be unable to issue refunds for 	one chec or May 15,	ue to this form in to 2019 per your partic	the amount of \$300, payable to cipation level choice.	
I choose to actively participate in the PPP by completing 20 hours of parent participation by May 31, 2019. I enclose a \$300 cheque dated May 15, 2019 which will be cashed only if I do not complete all 20 hours. I understand there will be no refund processed for partial completion of the assigned 20 hours of Parent Participation.	<u>OR</u>	volunteer hours. I \$300 fee. I enclose		
Signature			Signature	