



ST. ANN'S ACADEMY  
ESTABLISHED 1880

## 2025-2026 APPLICATION FOR ACTIVE-CATHOLIC TUITION RATE

Parent First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_ Parish: \_\_\_\_\_ Envelope Number: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_ (Baptism\_\_ 1<sup>st</sup> Communion\_\_ Confirmation\_\_)

\_\_\_\_\_ Grade: \_\_\_\_ (Baptism\_\_ 1<sup>st</sup> Communion\_\_ Confirmation\_\_)

\_\_\_\_\_ Grade: \_\_\_\_ (Baptism\_\_ 1<sup>st</sup> Communion\_\_ Confirmation\_\_)

\_\_\_\_\_ Grade: \_\_\_\_ (Baptism\_\_ 1<sup>st</sup> Communion\_\_ Confirmation\_\_)

Having met our obligations as Catholics to regularly attend Sunday Mass and Holy Days of Obligation, as well as to contribute to the well-being of the parish, we ask that we receive the Active-Catholic Rate as our Tuition Rate for the 2025 - 2026 school year.

\_\_\_\_\_ Regularly Attend Sunday Mass (This must be initialled by a parent or guardian.)

Family Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Family must fill out the fields above.

### FOR PASTOR/DELEGATE USE ONLY

Pastor/Delegate Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Approved: Yes \_\_\_\_ No \_\_\_\_