



ST. ANN'S ACADEMY  
ESTABLISHED 1880

---

## PARENT PARTICIPATION PROGRAM 2026-2027

---

Family Name: \_\_\_\_\_ Student Names: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

### What is required?

- ☛ Participation of 20 hours per year (15 hours if you pay tuition in full) for each family from August 15, 2026 to June 15, 2027.
- ☛ Choose your desired participation level and attach **one cheque to this form in the amount of \$600**, payable to St. Ann's Academy, dated **September 1, 2026 or June 15, 2027** per your participation level choice.
- ☛ **Please note we will be unable to issue refunds for cheques cashed after the June 15<sup>th</sup> date.**

<p>I choose to actively participate in the PPP by completing 20 hours of parent participation by June 15, 2027. I enclose a <b>\$600 cheque dated June 15, 2027</b> 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.</p>	<p><b>OR</b></p>	<p>I choose <b>NOT</b> to actively participate in the PPP through volunteer hours. I agree to participate by paying the \$600 fee. I enclose a cheque for \$600 dated September 1, 2026 which will be deposited immediately.</p>
<p>_____ Signature</p>		<p>_____ Signature</p>

---

### For Office Use Only

20 Hours Completed:    \_\_\_ Yes    \_\_\_ No

Deposit Cheque:        \_\_\_ Shredded    \_\_\_ Returned    \_\_\_ Deposited

Etransfer Deposit:     \_\_\_ Carried Over    \_\_\_ Refunded

Cash Deposit:            \_\_\_ Carried Over    \_\_\_ Refunded    \_\_\_ Deposited