

## St. Joseph Parish SCRIP Information Sheet

**PRIORITY DISTRIBUTION WILL BE GIVEN TO FAMILIES WHO ARE ACTIVE PARTICIPANTS**

Please fill out the following information for our records:

Family Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Name(s) of Children	School or Program	Grade for upcoming school year
	SJY/RE/YC/PS	
	SJY/RE/YC/PS	
	SJY/RE/YC/PS	
	SJY/RE/YC/PS	
	SJY/RE/YC/PS	

\* SJY=St. Joseph Elementary School, RE=St. Joseph Religious Education Program, YC=York Catholic High School, PS=Post-Secondary or Trade School

Please direct our SCRIP SCHOLARSHIP to the following:

SJY TUITION ACCOUNT FOR THE FOLLOWING FAMILY: \_\_\_\_\_

RELIGIOUS EDUCATION TUITION ACCOUNT FOR THE FOLLOWING FAMILY: \_\_\_\_\_

YORK CATHOLIC TUITION ACCOUNT FOR THE FOLLOWING FAMILY: \_\_\_\_\_

POST SECONDARY SCHOOL TUITION ACCOUNT FOR THE FOLLOWING STUDENT: \_\_\_\_\_

\_\_\_\_\_  
TUITION ACCOUNT NUMBER (if known): \_\_\_\_\_

SCHOOL ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

SJY SCHOOL

SJY CHURCH

*SCHOLARSHIPS WILL BE APPLIED IN THE FOLLOWING ORDER: ST. JOSEPH SCHOOL, ST. JOSEPH RELIGIOUS EDUCATION, YORK CATHOLIC, POST-SECONDARY OR TRADE SCHOOLS*

BY CHECKING THIS BOX, YOU UNDERSTAND THAT YOU MUST PURCHASE A MINIMUM OF \$1000 IN ORDER TO BE ELIGIBLE FOR ANY SCHOLARSHIP FUNDS

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