

# CHURCH PARISH VERIFICATION FORM

## TO BE COMPLETED BY PASTOR:

*Please sign only the space that best describes the applicant and affix seal upon your verification to certify the status of applicant. Parishioners should be registered in a parish for a full year.*

Name of Parent or Guardian: \_\_\_\_\_

The family is:

1. Territorial

\_\_\_\_\_  
Pastor's Signature

2. Registered

\_\_\_\_\_  
Pastor's Signature

3. Registered, attends regularly

\_\_\_\_\_  
Pastor's Signature

4. Registered, attends regularly,  
involved and/or financially  
supportive

\_\_\_\_\_  
Pastor's Signature

Religion of applicant \_\_\_\_\_

Church Parish /City/State: \_\_\_\_\_

Date Signed \_\_\_\_\_