



# Our Lady of the Angels

## PARISH VERIFICATION

(Parishes other than Holy Trinity and St. Peter, Columbia)

Please submit this form to your Parish for a signature

Name of your Parish \_\_\_\_\_ Location \_\_\_\_\_

Parent(s)/Guardian(s) name \_\_\_\_\_

Parent(s)/Guardian(s) phone numbers \_\_\_\_\_ / \_\_\_\_\_  
Home Work

Address \_\_\_\_\_  
Street City Zip

Student's name \_\_\_\_\_ Grade \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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### This section to be completed by the Parish

Based on the contribution of time, talent, and treasure, I consider this family to be:

Family Registered in this Parish \_\_\_\_\_

Family NOT Registered in this Parish \_\_\_\_\_

Comments from the pastor \_\_\_\_\_  
\_\_\_\_\_

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

Please return this form to:  
Our Lady of the Angels School  
215 Union Street  
Columbia, PA 17512

Thank you for your support of Catholic Education