



**ARCHDIOCESE
OF PORTLAND IN
OREGON**

Office for the Mission of Catholic Education

2024-25 School Registration Form – For Use by “Out-of-Parish” Families

The Archdiocese of Portland’s **K-8 Elementary School Financial Operation Plan (2007 Revision)** and **Forming Missionary Disciples: A Strategic Plan for Catholic School Education (January 2018)** states that parishes without elementary schools will assist in financially supporting Catholic education in the Archdiocese of Portland. Currently, the amount of support given by parishes without schools is based on the number of qualifying Catholic K-8 students enrolled in Archdiocesan elementary schools. The amount per student is determined by the Office for the Mission of Catholic Education and will be billed to the Parishes by the School the student is attending after school begins in Fall 2024.

A qualifying **K-8** Catholic student is determined as follows:

1. The family must be registered in the Parish, be involved, and attend church in the Parish; AND
2. The family must give regular, identifiable financial support to the Parish (e.g., through use of Parish contribution envelopes, checks, or electronic giving); AND
3. Parishes **may not** add additional requirements.

This form is intended to encourage Pastors and families to meet and discuss how the family is (or can become) a qualifying Catholic family. Qualifying “Out-of-Parish” Catholic families should receive the same tuition rates as “In-Parish” Catholic families.

As part of the School registration process, this form must be completed by a parent/guardian, **signed by a parent/guardian, signed by their Pastor**, and returned to the school office. Families and Pastors should keep a copy for your records.

Name of School: _____ **Name of Parish the Family Attends:** _____

Parents’/Guardians’ Names (First and Last Names):

1. _____ 2. _____

Phone Number: _____ Email Address: _____

Name and (Grade) of Student(s) to be enrolled for 2024-25 School Year:

(1) _____ () (2) _____ ()

(3) _____ () (4) _____ ()

X _____ DATE _____
PARENT/GUARDIAN SIGNATURE (required)*

**The Family agrees it meets the above requirements and is asking the Parish to financially support Catholic education.*

X _____ DATE _____
PASTOR SIGNATURE (required)*

** The Pastor agrees the Parish will pay support of \$1,150 to the School, as billed by the School to the Parish, for each qualifying K-8 student.*