ST. EDWARD SCHOOL

Family Number ______
Name _______________________
Student ______________________
Grade ______
Service _______________________
Date ________________________
Hours ______
Chair Sign ____________________
(PARENTS: Keep for your records)

ST. EDWARD PARENT PARTICIPATION RECORD

Service Date ____________ Points/Hours ____________
Service done by (Name) ____________________________ Family No. ______
Oldest Child __________________________ Grade ______
Service __________________________

This family has worked an activity and should be credited with service for the above hours.

Authorized Signature ____________________________
Please Print Name ________________________________

(PARENTS: Please put into the Parent Point file located in the office no later
than 30 days from Service Date)