

**ST. EDWARD SCHOOL**

**ST. EDWARD PARENT PARTICIPATION RECORD**

Family Number \_\_\_\_\_  
Name \_\_\_\_\_  
Student \_\_\_\_\_  
Grade \_\_\_\_\_  
Service \_\_\_\_\_  
Date \_\_\_\_\_  
Hours \_\_\_\_\_  
Chair Sign \_\_\_\_\_  
(PARENTS: Keep for your records)

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*)