

Assumption Regional Catholic School

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www.arcsgalloway.org

To Parish Office:

Please confirm if the family listed below is registered or not registered in your parish. Please return by fax (preferred) or mail. Thank you.

This is to verify that the _____ family
(name)

of _____ are registered
(address)

parishioners at _____ Parish.

Registered

NOT Registered

signature

position at parish house