

SAINT FRANCIS
OF
ASSISI
ROMAN CATHOLIC CHURCH
HENDERSON, NEVADA



REQUEST FOR RETREAT FINANCIAL ASSISTANCE

Date: _____

Name: _____

Student's Name: _____

Because of my current financial hardship I would like to request financial assistance for the Youth Ministry retreat on _____.

(Check one):

- I am unable to pay any amount.
- I am able to pay $\frac{1}{2}$ of the total retreat cost.
- I am able to pay a different amount: \$_____.

Signature: _____

SECTION FOR OFFICE USE ONLY

Registration received on: _____

Permission slip received on: _____

Cost of Retreat: \$_____

Payment made (If applicable): \$_____

Sponsorship amount from donor(s) (if applicable): \$_____

Received by: _____
(David Hall)

Reviewed by: _____
(Craig King)

Approved by: _____
(Fr John)

Once signed please return to David Hall in the Youth Ministry Office