

SDA Constituent Church _____

School Year _____

Parent/Guardian _____

Parent/Guardian Pledge \$ _____

(Minimum of \$50.00 per child)

Name of Parent/Guardian _____
Please Print

Date: _____

Name of Parent/Guardian _____
Signature

Date: _____

Sponsor Pledge \$ _____

Name of Sponsor _____
Please Print

Date: _____

Name of Sponsor _____
Signature

Date: _____

Church Aid Requested \$ _____

Tuition Total \$ _____

Total Church Aid Granted \$ _____

Church Board Approval _____

Date: _____

Name of Pastor _____
Please Print

Date: _____

Name of Pastor _____
Signature

Date: _____

Name of Treasurer _____
Please Print

Date: _____

Name of Treasurer _____
Signature

Date: _____