

# NORWALK CATHOLIC SCHOOL SHOP PROGRAM

## Registration Form

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Your Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Your First Name \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

Spouse's First Name \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

STUDENT (fill out only if they are **your** children)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE APPLY MY SHOP CREDITS TO:**  
(Check **ONLY** one unless you are splitting your credit)

\_\_\_\_\_ My family's tuition account

\_\_\_\_\_ Another family's tuition (Please specify parent's name on the line below)

\_\_\_\_\_

\_\_\_\_\_ Tuition assistance for needy families

\_\_\_\_\_ Norwalk Catholic Schools

\_\_\_\_\_ General parish operations (please check specific parish of your choice)

St. Paul \_\_\_\_\_ St. Mary \_\_\_\_\_ St. Anthony \_\_\_\_\_

**RETURN COMPLETED FORM TO ANY SCHOOL OR PARISH OFFICE OR  
MAIL TO: NCS SHOP PROGRAM  
38 W. LEAGUE  
NORWALK, OH 44857**

Please direct any questions to the SHOP Coordinator - Carol Fries - 419-668-7925.

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FOR OFFICE USE ONLY

FAMILY ID # \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_