

# VOGEL LEGACY CATHOLIC SCHOOL EDUCATION FUND

Parishioner's Family Name (Mr. /Mrs. /Ms.) \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City & Zip Code \_\_\_\_\_

Email address \_\_\_\_\_

First time applicant Yes No (Circle one)

Name \_\_\_\_\_ Grade as of 9/21 \_\_\_\_\_ School Attending \_\_\_\_\_

Name \_\_\_\_\_ Grade as of 9/21 \_\_\_\_\_ School Attending \_\_\_\_\_

Name \_\_\_\_\_ Grade as of 9/21 \_\_\_\_\_ School Attending \_\_\_\_\_

Name \_\_\_\_\_ Grade as of 9/21 \_\_\_\_\_ School Attending \_\_\_\_\_

I am an active, registered, contributing member of Parish of the Holy Family: Yes \_\_\_\_\_ No \_\_\_\_\_

List the activities you are/have been involved with at the Parish of the Holy Family.

\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please return this form no later than **December 13, 2020 for the 2021 – 2022 school year**. Awards will be announced in the Spring of 2021.

Return the completed form to:  
Vogel Legacy Catholic School Education Fund  
Parish of the Holy Family  
4100 Lyell Road  
Rochester, NY 14606