

Date: _____

FORM #8

PARISH/SCHOOL PAYMENT ASSESSMENT FORM

2013 National Catholic Youth Conference



- ***This form is to be filled out each time you would like for the Archdiocese to arrange for a Parish/School Assessment for your payment of NCYC fees. All Parishes and most Catholic Schools in the Archdiocese of Indianapolis are set up to allow for transfer of funds through this payment method. If you are unsure of your capabilities for a Parish/School Assessment, please contact your Business Manager or our offices at 317-236-1442.***
- ***It is advisable for you (the Group Leader) to keep a copy of each submitted Assessment Form for your own records. Please also consider giving a copy to the Business Manager at your Parish/School so that he/she will be expecting the requested transfer of funds.***
- ***Should it be that your Group is comprised of two or more Parishes/Schools, please fill out a separate Assessment Form for each Parish/School. You are welcome to duplicate this form as often as necessary.***

Date: _____

Group Leader Name: _____

Group Leader E-mail Address: _____

School/Parish Name: _____

Parish/School Code/Number: _____

School/Parish Phone Number: (_____) _____

School/Parish Address: _____

Assessment Amount: \$ _____

Duplicate this sheet as necessary