



ST. JOSEPH PARISH

Agape Financial Agreement

Participant's Name: _____

Parent/Guardian's Name: _____

Home Address: _____

Home Phone: _____

Work Phone: _____

Email: _____

The cost for the Agape Service Project is \$400.

Please select the method of payment that works best for your family:

- Personal check – Make out the check to St. Joseph Parish and attach it to this form.
- Venmo – @stjoes (look for the parish's rose window)
- Cash

Please indicate if you will require a partial scholarship to help cover the cost and what level of scholarship you will require:

- I can pay _____ and I will need _____ in scholarship funds.

To register, please send in: Parental Consent for Youth, St. Joseph Parish Agape Financial Agreement, and Agape Code of Behavior for Youth.

Completed Registration Forms can be sent in via email, snail mail, or in person.

Email address: cff@stjosephparish.org.

Drop off and mailing address:
St. Joseph Parish Center
Attn: Agape Registration
732 18th Ave East
Seattle WA 98112