

OUR LADY OF PEACE PARISH SERVICE CONTRACT

Name:_____

Grade:_____ Date:_____

Event:_____

Chairperson:_____

Print Name

Time in:_____ Time Out:_____ # of Hours:_____

I agree that the information given is accurate and I have completed Parish Service at this event.

Signature_____

I am the Chairperson of this event and acknowledge that the above named Student has completed Parish Service at this event.

Signature_____

Print _____