



# Western Catholic Union Catholic Grade School Grant



**Eligibility Requirements:**

- Student must be a member of Western Catholic Union.
- At least one parent or legal guardian must be members of Western Catholic Union.
- Student must be enrolled in a Catholic School for the upcoming year (Grades K-8).
- Completed entry form must be received by March 1.

**Entry Instructions:**

- Complete entry form and mail to: Western Catholic Union  
Fraternal Department  
PO Box 410  
Quincy, IL 62306
- Entry forms may also be returned in person to the WCU Home Office at 510 Maine St.  
in Quincy, IL.

-----  
Cut along the dotted line

## Western Catholic Union Grade School Grant Entry Form

Student's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ WCU Br. # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Name \_\_\_\_\_ WCU Br. # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Father's Name \_\_\_\_\_ WCU Br. # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name of Catholic School Currently Attending \_\_\_\_\_

Name of Principal \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Name of Catholic School Attending Next Year \_\_\_\_\_

Name of Principal \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

**Grade Attending Next Year (Must be indicated)** \_\_\_\_\_