



# Western Catholic Union Catholic Grade School Grant Application



**Eligibility Requirements:**

- Student must be a member of Western Catholic Union
- Student must be enrolled in a Catholic School for the 2026-27 school year (Grades K-8)
- Completed entry form must be received by April 1, 2026

**Please submit completed application by one of the following ways:**

- Mail: Western Catholic Union  
Fraternal Department  
510 Maine St  
Quincy, IL 62301
- Email: [ajarrett@wculife.org](mailto:ajarrett@wculife.org)
- Fax: 217-223-9726 Attn: Fraternal Dept.

## Western Catholic Union Grade School Grant Entry Form

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

Date of Birth \_\_\_\_\_ T-shirt Size \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Legal Guardian Name \_\_\_\_\_

Street Address *(if different than above)* \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Name of School Attending 2026-27 School Year \_\_\_\_\_

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

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Grade Enrolled in 2026-27 School Year (Must be indicated) \_\_\_\_\_

***\*If your child is awarded a grant, their name and/or photo may be used in our newsletter. If you wish for a picture of your child to be included, please send one. Do you give permission for WCU to use your child's name and/or photo in WCU publications?     Yes     No***

**Parent/Legal Guardian Signature** \_\_\_\_\_

For Home Office Use Only: Branch # _____
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