



2018
Catholic Ministries Appeal
Renew Faith. Extend Mercy. Inspire Hope.

Parish Project Registration

**IMPORTANT: To guarantee a 100% rebate of monies exceeding parish goal,
 Return this form to the Catholic Foundation of Southern Minnesota
 NO LATER THAN MAY 31, 2018**

Parish Name: _____

Pastor Name: _____

Parish City: _____

I certify that our parish will participate in the capital project component of the 2018 Catholic Ministries Appeal.

Through the 2018 Catholic Ministries Appeal, we intend to raise \$_____ for our parish project.

Include a brief description of the project:

Pastor Signature: _____ **Date:** _____

Return to: 2018 Catholic Ministries Appeal
 Catholic Foundation of Southern Minnesota
 PO Box 30098
 Winona, MN 55987

For Office Use Only:
 Date Received: _____

CATHOLIC
 FOUNDATION
 of Southern Minnesota