PARENTAL REFERRAL PROGRAM

If you know a friend, family member or anyone looking for a high-quality, Christ-centered education for their children, you could receive a $500 credit toward your child's tuition at Berks Catholic.

Berks Catholic's Parental Referral Program is a win-win for everyone involved. Referred students receive an outstanding education from Berks Catholic, while parents of the referred families get peace of mind knowing their child is gaining so much more than just a top-notch education.

Families who refer someone to Berks Catholic receive a $500 credit towards their child's tuition.

In order for the Parental Referral Program to be a success, we need information for individuals who may be interested in joining the Berks Catholic family. All you need to do is fill out the form below. During the enrollment process, if you are listed as the referring individual for a friend or other enrolling individual, we will credit your child's account with $500* upon completion of their first full year at Berks Catholic.

It really is that simple. So go ahead.

Please complete the form below and allow us the opportunity to do what we love – helping to develop, nurture and encourage children so they may grow spiritually, intellectually, emotionally and socially. Mail or email the form to us and we will take it from there!

Mail to address: Berks Catholic, Attn: Nicole Smith, 955 E. Wyomissing Blvd., Reading, PA 19611
Email to address: Nicole Smith, Director of Admissions, nsmith@berkscatholic.org

****Parental Referral Program** is open to all parents of current Berks Catholic students. ***500. is applied at the end of the referred students full year at Berks Catholic.** Tuition credit not available for referring your own children. **Applies** only to students from non-partner schools. $500 credit is only good toward tuition on student's account. Credit applied to student's account only, no cash given, non-transferable.

***Referal received after a prospective student has been in contact with the Admissions Office are NOT eligible for Parental Referral Program.**

REFER A FRIEND

YOUR NAME _____ YOUR STUDENT'S NAME _____ CURRENT GRADE _____

PHONE NUMBER _____ EMAIL _____

NAME OF STUDENT YOU ARE REFERRING _____

CURRENT SCHOOL AND GRADE OF STUDENT _____

STUDENT'S ADDRESS: STREET _____ CITY _____ ZIP _____

EMAIL _____ PHONE NUMBER _____

COMMENTS OR NOTES ABOUT THIS STUDENT _____

GOD | FAMILY | ACADEMICS | FUN