

**St. Peter Central Catholic  
865 Main Street  
Worcester, MA 01610  
(508) 791-6496**

**SERVICE AGREEMENT  
2019-2020**

M/M

Mr. NAME \_\_\_\_\_

Mrs.

Ms. ADDRESS \_\_\_\_\_

CITY ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

Home Phone #

Work Phone #

E-Mail \_\_\_\_\_

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**PLEASE INITIAL OPTIONS**

<b>BINGO</b>	Bingo Kitchen 3:30 – 6:00 _____		CHRISTMAS FAIR _____
	6:00 – 9:00 _____		
	Bingo Sellers 3:45 – 6:00 _____	may choose	AUCTION _____
	Floor Sellers 5:00 – 8:00 _____	2 options	
	Verifiers 6:00 – 9:00 _____	for	SPREE DAY _____
	Callers 6:00 – 9:00 _____	Bingo	
			FRIGHT NIGHT _____
			BOOK FAIR _____

We, \_\_\_\_\_, agree to provide **30 hours** of service to  
ST. PETER CENTRAL CATHOLIC.

We, \_\_\_\_\_, choose **not** to participate in a Service  
Agreement and will select the higher tuition rate.

**Signature:** \_\_\_\_\_