

Saint Patrick Roman Catholic Church

FAMILY REGISTRATION

Family Name _____ Date (d/m/y) _____

Address _____ Apt./Unit _____

City _____ Postal Code _____

Phone # ^{Hm} ^{Cell} () _____ Alternate ^{Hm} ^{Cell} ^{Wk} () _____

E-mail Address _____

Please consider supporting the parish through regular contributions.

We have two options as a means to support the parish?

Would you like to receive a boxed set of Envelopes Yes No

Would you like to use Direct Debit (Automatic Withdrawal) Yes No

Some parishioners choose to use both D.D. and envelopes. Simply write DD or Auto Withdrawl on your empty envelope and drop it in the collection basket each week.

Current Marital Status:								
Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Common Law <input type="checkbox"/> Single <input type="checkbox"/> Single Parent <input type="checkbox"/>								
Please list the names of all who reside in your home.				Attend Usual Mass				
First and Last Name if different from the Family Name above				Birth	Religion	Sat. Spm	9am	11am
Circle one				d/m/y	(Optional)			
Mr. Mrs. Miss Ms.								
Mr. Mrs. Miss Ms.								
Mr. Mrs. Miss Ms.								
Mr. Mrs. Miss Ms.								

Children's Name	Birth (d/m/y)	Religion	Baptism	Confirmation	School	Grade	Attends Children's Liturgy
	M / F						
	M / F						
	M / F						
	M / F						
	M / F						
	M / F						