



# ST MARY'S CATHOLIC CHURCH

51 Venison Street West, Tillsonburg, ON, N4G1V1 Phone: (519) 842-3224, Fax: (519) 660-7290, Email: stmarytils@dol.ca

Web: stmarys.dionet.ca, Facebook: "St-Marys-Parish-Tillsonburg"

<input type="checkbox"/> New Parishioner Registration <input type="checkbox"/> Registered Parishioner Information Update
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**PRIMARY MEMBER:**

Mr.  Mrs. \_\_\_\_\_  Sick/Shut-In  
 Ms.  Miss. (Last, First)

Birth Date: \_\_\_\_\_ (DD/MM/YY) Religion:  Roman Catholic  Other

Address: \_\_\_\_\_ Apt # / P.O. Box #: \_\_\_\_\_  
 (if rural - 911# required)

Postal Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ E-mail: \_\_\_\_\_

**OTHER ADULT MEMBER:**

Mr.  Mrs. \_\_\_\_\_  Sick/Shut-In  
 Ms.  Miss. (Last, First)

Relationship to Primary Member:  Spouse  Common Law  Other: \_\_\_\_\_

Birth Date: \_\_\_\_\_ (DD/MM/YY) Religion:  Roman Catholic  Other

Address: \_\_\_\_\_ Apt # / P.O. Box #: \_\_\_\_\_  
 (if rural - 911# required)

Postal Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ E-mail: \_\_\_\_\_

**CHILDREN: (Living at home)**

Name: \_\_\_\_\_  M  F      Name: \_\_\_\_\_  M  F

Birth Date: \_\_\_\_\_      Birth Date: \_\_\_\_\_

School (Grade): \_\_\_\_\_      School (Grade): \_\_\_\_\_

Baptism: \_\_\_\_\_ (D/M/YY)      Baptism: \_\_\_\_\_ (D/M/YY)

1<sup>st</sup> Communion: \_\_\_\_\_ (D/M/YY)      1<sup>st</sup> Communion: \_\_\_\_\_ (D/M/YY)

Confirmation: \_\_\_\_\_ (D/M/YY)      Confirmation: \_\_\_\_\_ (D/M/YY)  
 (see reverse)

**ADDITIONAL CHILDREN AND FAMILY MEMBERS: (Living at home)**

Name, Relation: \_\_\_\_\_  M  F

Name, Relation: \_\_\_\_\_  M  F

Birth Date: \_\_\_\_\_

Birth Date: \_\_\_\_\_

School (Grade): \_\_\_\_\_

School (Grade): \_\_\_\_\_

Baptism: \_\_\_\_\_ (D/M/YY)

Baptism: \_\_\_\_\_ (D/M/YY)

1<sup>st</sup> Communion: \_\_\_\_\_ (D/M/YY)

1<sup>st</sup> Communion: \_\_\_\_\_ (D/M/YY)

Confirmation: \_\_\_\_\_ (D/M/YY)

Confirmation: \_\_\_\_\_ (D/M/YY)

**PARISH LIFE:**

I would like Offertory envelopes

or

I would like Direct Deposit

Tax Receipt Issued to: \_\_\_\_\_

Would you like any member of the Pastoral Team to contact you?  Yes  Not at this time

Regarding:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there any area of Parish activity which you would like information about?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR OFFICE USE ONLY:**

DDMS Envelope # \_\_\_\_\_

Teena

Fr. John

Colleen

Updated Jul 2018