



# St Mary's Roman Catholic Church

5251 Joyce Street, Vancouver, BC V5R 4G8

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[www.stmarysvancouver.ca](http://www.stmarysvancouver.ca)

## PARISH REGISTRATION FORM

Confidential – For Parish Use Only

New Registration     Already Registered – please update records    Date: \_\_\_\_\_

FAMILY INFORMATION (Please print)			
Last name:		Home Phone: <input type="checkbox"/> Unlisted	
Street:			
Apt.:	City:	Postal Code:	
Primary Language:		Secondary Language(s):	
Do you wish to receive Sunday offering envelopes? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Already Receive			
Note: <i>Regular envelope usage may be considered for Catholic school admission.</i>			

	Primary Contact	Spouse/Partner
First Name:		
Preferred Name:		
Last Name: (if different)		
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth Date: dd/mm/yyyy		
Religion/Denomination:		
Marital Status:		
Baptized	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Confirmed	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cell Phone:		
Email Address:		

CHILDREN	Please complete for all unmarried children living in household.			
	1st Child	2 <sup>nd</sup> Child	3 <sup>rd</sup> Child	4 <sup>th</sup> Child
First Name:				
Preferred Name:				
Last Name:				
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth Date: dd/mm/yyyy				

Note: As a courtesy, please inform your previous parish that you have moved to St. Mary's.

**For Office Use Only** (form rev. Feb 6, 2008)

Date Entered: \_\_\_\_\_ Date Revised: \_\_\_\_\_ Welcome Reception: \_\_\_\_\_