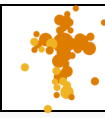


NEW PARISHIONER REGISTRATION FORM



Saint Michael
Catholic Community

800 - 85th Street SW
Calgary, Alberta, Canada, T3H 4C7
Phone 403-249-0423 Fax 403-249-1031
www.saintmichael.ca

Today's Date

month day year

Part A General information about you and your family

Surname(s)/ Last Name(s)

Husband Wife

Email address

Address

Are you registering as a new parishioner or for Sacraments only?

New Parishioner Sacrament Preparation Outside of Parish Home Parish

Phone (h)

Postal Code

If you are registering as a new parishioner, do you prefer direct debit or contribution envelopes for your donations?

Direct Debit Contribution Envelopes

Phone (c)

Area

example: Wildwood, Springbank

If contribution envelopes, please pick up your box in the gathering area near the book rack. Tax receipts will be issued for donations given via direct debit or contribution envelopes.

Part B

Specific information about you and your family in your household. Required Information to assist us in providing accurate sacrament records to the Diocese of Calgary.

First Name	Middle Name	Date of Birth	Position in family	Sex M/F	Occupation	Business /Cell Phone	Religion	Catholic Marriage	Baptism	First Communion	First Reconciliation	Confirmation
								Y / N	Y / N	Y / N	Y / N	Y / N
								Y / N	Y / N	Y / N	Y / N	Y / N
									Y / N	Y / N	Y / N	Y / N
									Y / N	Y / N	Y / N	Y / N
									Y / N	Y / N	Y / N	Y / N
									Y / N	Y / N	Y / N	Y / N
									Y / N	Y / N	Y / N	Y / N

Please drop off completed form at parish office or email to: parish@saintmichael.ca