

# REGISTRATION FORM

Please print clearly

Mr. \_\_\_\_\_ Mrs. \_\_\_\_\_ Ms. \_\_\_\_\_

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt/Suite/Unit \_\_\_\_\_

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Home phone #: \_\_\_\_\_

Work phone #: \_\_\_\_\_

Cell phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Have you registered before? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you wish Offertory Envelopes? (Only if you plan to use them mark yes)

Yes \_\_\_ No \_\_\_

**Kindly return to parish office. If you requested offertory envelopes, please pick them up the following weekend or during the week at the office.**