Maternity of the Blessed Virgin Mary
Parish Survey

FAMILY NAME

_____

Street Address

_____

City

_____

State _____ **Zip** _____ **Phone #** _____

Do you have any comments or suggestions for our Parish Church, School or Ministries?	**Is there something you've seen at another parish that you would like to see at Maternity B.V.M.?**	**Please write any additional thoughts or comments regarding our Parish Community.**

Please complete this form and drop it in the Sunday collection,
e-mail to *cregan@maternitybvm.net,* or mail/drop off to the Rectory.

All information will be held in confidence for pastoral use only.

If you have questions regarding the form, please call the Rectory Office at 215-673-8127.