

St. Clement Parish

9567 County Road 11, McGregor ON N0R 1J0
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Email: stclements@dol.ca Website: www.stclements.dol.ca

Parish Registration Form

Welcome to our parish! Please take a few minutes to complete this form and return it to the parish office or in the collection basket as soon as possible. This information will be kept confidential.

Family Name: _____

Husband: _____

Wife: _____

(Maiden Name : _____)

Date of Birth: _____

Date of Birth: _____

Religion: _____

Religion: _____

Please indicate status: Married _____

Place of marriage: _____

Common-law _____

Widowed _____

Separated _____

Divorced _____

Single _____

Children at home

(Include those away studying)

Circle letters to indicate the sacraments
each child has received to date:

B = Baptism **E** = First Communion

C = Confirmation

<u>Name</u>	<u>Male/Female</u>	<u>Child's Date of Birth</u>			
_____	M / F	_____	B	E	C
_____	M / F	_____	B	E	C
_____	M / F	_____	B	E	C

(Please use the back of this form if more space is needed)

Complete Address

(House Number) (Street Name) (PO Box / RR #)

(Town / City) (Postal Code) (Home Phone) (Cell Phone)

Email: _____

Would you like a box of offertory envelopes? YES NO Would you like to be contacted for Direct Debit? YES NO

I hereby grant permission for the information listed herein to be used for parish purposes only, at the discretion of the pastor.

Signature: _____

Date: _____