ST. JUSTIN'S PARISH

FAMILY REGISTRATION & INFORMATION FORM

855 Jalna Boulevard, London, ON N6E 2S2
Phone: (519) 685-2795 Fax: (519) 685-0505
Email: stjustins@dol.ca

*Thank you for providing the information below. This information will be used **ONLY** within the parish, by parish leaders, to enhance communication with your family and to help meet the needs of our parish family. Respond only to those questions with which you feel comfortable answering. Please print clearly and neatly.*

FAMILY INFORMATION

DATE REGISTERED: _____

Family Correspondence:

Name to be printed on form letters: _____

Name to be printed on tax receipts: _____

Spouse's Maiden Name: _____ *(if applicable)*

Home Address:

Street # & Name: _____ Apt Number: _____

City & Province: _____ Postal Code: _____

Contact Information:

Home Phone: (_____) _____ - _____ Unlisted: ☐ YES

Work Phone: (_____) _____ - _____ Cell Phone: _____ - _____

Email: _____ Fax Number: _____ - _____

Previous Parish: _____

PRIMARY MEMBER INFORMATION

Sunday Envelopes Required: ☐ YES ☐ NO

(Please pick up requested envelopes at Welcome Desk next weekend)

Member Information

Title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ None ☐ Other: _____

Name: _____
(First) (Middle) (Last)

Date of Birth: _____ Gender: ☐ Male ☐ Female
(Month) (Day) (Year)

Marital Status: ☐ Single ☐ Married ☐ Common Law ☐ Widowed ☐ Separated ☐ Divorced

Religion: _____ Occupation: _____

Sacraments Received in the Catholic Church:

☐Baptism ☐First Communion ☐First Reconciliation ☐Confirmation ☐Catholic Marriage

Talents/Interests you might share with the Parish *(this information is not used for ministry recruitment)*:

☐Building/Repairs ☐Finance ☐Music - Instrumental ☐Working with Youth
☐Decorate/Paint ☐Office/Secretarial ☐Music - Vocal ☐Teaching - Adults
☐Garden/Landscape ☐Teaching - Children/Youth
☐Trades/Languages/Others: _____

If you are a single person living alone, please stop here.
If there are others, Catholic or Non-Catholic, living in your home, please continue.

OTHER MEMBER INFORMATION

Title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ None ☐ Other: _____

Relationship to Primary Member: ☐ Husband ☐ Wife ☐ Son ☐ Daughter ☐ Other: _____

Name: _____
(First) (Middle) (Last)

Date of Birth: _____ Gender: ☐ Male ☐ Female
(Month) (Day) (Year)

Marital Status: ☐ Single ☐ Married ☐ Common Law ☐ Widowed ☐ Separated ☐ Divorced

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Title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ None ☐ Other: _____

Relationship to Primary Member: ☐ Husband ☐ Wife ☐ Son ☐ Daughter ☐ Other: _____

Name: _____
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☐Trades/Languages/Others: _____

For information about Sacramental Preparation and/or Ministry Programs, Events or Committees, please pick-up our "Ministry Guide" from the office.

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Title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ None ☐ Other: _____

Relationship to Primary Member: ☐ Husband ☐ Wife ☐ Son ☐ Daughter ☐ Other: _____

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☐Trades/Languages/Others: _____

After we receive your "Family Registration & Information Form" a 'Welcome Package' will be mailed to your home and a member of our parish Welcoming Committee will contact you.

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Title: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ None ☐ Other: _____

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