



ST. GABRIEL PARISH REGISTRATION FORM

2261 Parkway Drive, Burlington, ON L7P 1S9

905 336 7144 Fax 905 336 0790

email: office@saintgabrielchurch.com

DATE: _____

FAMILY NAME: _____

Yes, I would like to use Sunday Offertory Envelopes Envelop # _____

No, I would not be interested in using Sunday Offertory Envelopes ID# _____
(Office use only)

STREET ADDRESS: _____ **APT/UNIT:** _____

CITY: _____ **POSTAL CODE:** _____

HOME TELEPHONE: () _____ **FAX:**() _____

Alternate mailing address: _____

Email address: _____

First Name:	Spouse Name:
Religion:	Religion:
Baptized: Yes <input type="checkbox"/> No <input type="checkbox"/>	Baptized: Yes <input type="checkbox"/> No <input type="checkbox"/>
Confirmed: Yes <input type="checkbox"/> No <input type="checkbox"/>	Confirmed: Yes <input type="checkbox"/> No <input type="checkbox"/>
Birth date: (d/m/y)	Birth date: (d/m/y)
Occupation:	Occupation:
Business telephone: ☎	Business telephone: ☎

Name of church where married:.....

Location of church :.....

Language:

(See over)

Child's Name (only living at home)	Birth date(d/m/y)	Baptized yes <input type="checkbox"/> no <input type="checkbox"/> First Communion yes <input type="checkbox"/> no <input type="checkbox"/> Confirmation yes <input type="checkbox"/> no <input type="checkbox"/> School in Attendance:
Child's Name (only living at home)	Birth date(d/m/y)	Baptized yes <input type="checkbox"/> no <input type="checkbox"/> First Communion yes <input type="checkbox"/> no <input type="checkbox"/> Confirmation yes <input type="checkbox"/> no <input type="checkbox"/> School in Attendance:
Child's Name (only living at home)	Birth date(d/m/y)	Baptized yes <input type="checkbox"/> no <input type="checkbox"/> First Communion yes <input type="checkbox"/> no <input type="checkbox"/> Confirmation yes <input type="checkbox"/> no <input type="checkbox"/> School in Attendance:
Child's Name (only living at home)	Birth date(d/m/y)	Baptized yes <input type="checkbox"/> no <input type="checkbox"/> First Communion yes <input type="checkbox"/> no <input type="checkbox"/> Confirmation yes <input type="checkbox"/> no <input type="checkbox"/> School in Attendance:
Child's Name (only living at home)	Birth date(d/m/y)	Baptized yes <input type="checkbox"/> no <input type="checkbox"/> First Communion yes <input type="checkbox"/> no <input type="checkbox"/> Confirmation yes <input type="checkbox"/> no <input type="checkbox"/> School in Attendance:

I would like to have the parish office contact me regarding:



Baptism []



Wedding []

Other

.....

(BRIEF COMMENT)