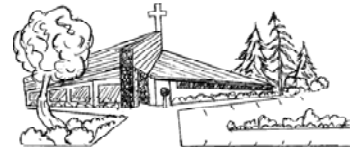


# ALL SAINTS PARISH



Please see reverse for All Saints Parish privacy clause.

In order to complete registration the privacy clause must be signed.

*All Saints Parish collects and protect the personal information on this form pursuant to the Personal Information Protection Act and Canon Law. The information will only be used to establish a parishioner's status in the Roman Catholic Church, managing the parishioner-parish relationship, identifying resources parishioners would like to access and/or ways parishioners can assist the parish. This information will not be disclosed without your prior consent.*

## CONFIDENTIAL PARISH REGISTRATION FORM

**PLEASE PRINT CLEARLY**

Date: \_\_\_\_\_

Family Name: \_\_\_\_\_ Given Names: \_\_\_\_\_

Date of Birth: Month \_\_\_ Year \_\_\_

Religion: Roman Catholic If not, please indicate: \_\_\_\_\_

Occupation: \_\_\_\_\_

Have you ever been confirmed: Yes  No

Address: \_\_\_\_\_

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

Home Tel: \_\_\_\_\_

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

Marital Status: Single  Married  Separated  Divorced  Widowed

If married: Name of Spouse: \_\_\_\_\_ Date of Birth: Month \_\_\_ Year \_\_\_

Religion: \_\_\_\_\_ Occupation: \_\_\_\_\_

Were you married in a Catholic church? Yes  No

I/We would like a set of Sunday offering envelopes (*will be assigned & left in the vestibule the following Sunday*)

### Information on Children under age 18

Please print date sacrament was received

Given Name	Date of Birth Month/Year	School	Baptism	Communion	Confirmation

*Please use the back of this form if you need more space*

I/We would like to participate in the following: (Please check as appropriate)

- |   |   |
|---|---|
| Altar Society <input type="checkbox"/>        | C.C.O. <input type="checkbox"/>         |
| Children's Liturgy <input type="checkbox"/>   | Choir/Music <input type="checkbox"/>    |
| Collection Counters <input type="checkbox"/>  | C.W.L. <input type="checkbox"/>         |
| Eucharistic Minister <input type="checkbox"/> | K of C <input type="checkbox"/>         |
| Lector <input type="checkbox"/>               | Legion of Mary <input type="checkbox"/> |
| Parish Outreach <input type="checkbox"/>      | Prayer Group <input type="checkbox"/>   |
| P.R.E.P. Teacher <input type="checkbox"/>     | Usher <input type="checkbox"/>          |
| 55+ Group <input type="checkbox"/>            | Others (please specify) _____           |

**For my child/ren:** Youth Group

Altar Server

Others (please specify) \_\_\_\_\_

*I hereby understand that the information on this form as per the clause included above will be kept confidential and not disclosed to others without my prior consent.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date

**ALL SAINTS PARISH PRIVACY STATEMENT**

All Saints Parish collects and protects the personal information on this form pursuant to the Personal Information Protection Act and Canon Law. The information will only be used for the following purposes:

1. Maintaining parish registration information
2. Providing parishioners who donate to the parish either via envelope or other methods with tax receipts.
3. Ascertaining status of parishioner or their children for reception of sacraments in the Roman Catholic Church.

This information will not be disclosed to any other organization without your prior consent.

What is your preferred method of contact from the parish?

Phone                       Email                       Both

If you have indicated that you like to assist in one of our parish ministries what contact information may we make available to the Ministry Coordinators?

Phone                       Email                       Both

May the parish use information provided under the 'Occupation' item line to contact you for advice on your area of expertise should the need arise?

Yes                       No

Having read the above I understand and agree to the usages of my personal information. I also understand that at anytime I may withdraw consent but must give the parish written or verbal notice.

\_\_\_\_\_  
Signature                                      Date                                      Email address

\_\_\_\_\_  
Spouse's Signature                                      Date                                      Spouse's Email address

Comments or suggestions as to how we can improve our service to God and neighbours :

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