

Church Care-Cleaning

Church Care-Flowers

Church Care-Gardens

Couples for Christ

Church Care – Altar Linens

Church Care – Altar Servers Cassocks/Surplices

Envelope #:_____

Date:__

CONFIDENTIAL PARISH REGISTRATION FORM

PLEASE PRINT CLEARLY									
egal Last Name		Legal Fi	rst Name			Date of Birth: (MMM-DD-YYYY)			
Address					Postal Code				
Home Phone	one Cell				ail				
Religion	Have you received the Sacrame Yes No D			nt of Confi	rmation?	Occupation			
5	Married 🗆	Com	mon-law 🗆	Separ	ated 🗆	Divor	ced 🗆 Widowe	d 🗆	
f married:			rst Name			DOB			
Spouse Legal Last Name		Legai Fi	ist Name						
Cell				Email					
Religion Have they received they			the Sacrame	ne Sacrament of Confirmation?			Occupation		
Were you married in a Catholic Yes D No D	Church?			Date of N	Aarriage: (N	MMM-I	DD-YYYY)		
Place of Marriage (if you were	married in Cl	nurch, pl	ease provide	the name	and addres	s of the	e Church:		
I / We would like a set	of Sunday	offering	envelopes (will be assi	aned & left	in the v	vestibule the followi	na Sundav)	
I / We would like to re		-	•				-	5	
I / We would like to re	eceive the Pa	arish Bu	lletin via em	ail	-	-			
Information on Children Under Age 19				Please mark with an X if already received.					
Given Name DOB (MMM-DD-Y		(YYY) Schoo		ol	Baptism		Communion	Confirmation	
Please use the back of this for	mifvounc								
				ease chorl	as annror	riatol			
I/We would like to join and/or participate Adoration Chapel		Counters				PREP Catechists			
Choir-Saturday 5pm		Greeters				Seniors Ministry			
Choir-Sunday 9am		Readers					After Mass Social		
Choir-Sunday 11am		Ushers					Young Adults Ministry		

Catholic Women's League

Chinese Community

Knights of Columbus

Marriage Mentorship

Legion of Mary

Men's Group

Youth Ministry Girls/Boys)

First Aid Attendants

Altar Servers (Boys)

For Children:

Corpus Christi Parish collects and protects the personal information on this form pursuant to the Personal Informati Protection Act and Canon Law. The information will only be used for the following purposes:								
 Maintaining parish registration information and statistics Providing parishioners who donate to the parish either via the use of donation envelopes or other methods, such as online, with tax receipts. Ascertaining status of parishioner or their children for reception of sacraments in the Roman Catho Church and/or enrolling their children in Catholic schools. 								
This information will not be disclosed to any other organization without your prior consent.								
If you no longer wish to be members of the parish, a written or verbal notice is required.								
May the parish use information provided under the ' <u>Occupation</u> ' item line to contact you for advice on your area of expertise should the need arise? Yes No No II If you have indicated that you like to join in one of our parish groups/ministries, what contact information may we make available to the Group/Ministry Coordinators?								
Phone Email Both								
What is your preferred method of contact from the parish? Phone D Email D Both D								
I/we agree to have my/our information shared with 3 rd parties (i.e., those contracted by Corpus Christi Parish to do specialized works like surveys, fundraising, etc.) Yes Yes No								

Having read the above I/we understand and agree to the usages of my/our personal information, which will be kept confidential and not disclosed to others without my/our prior consent. I/we also understand that at anytime I/we may withdraw consent but must give the parish written notice.

Signature

Date

Spouse's Signature

Date