

PARISH REGISTRATION

Please provide the information requested below and return it to the parish by email or in person during office hours.

Personal Information

You:

Name: _____ Religion: _____
Mr/Mrs/Ms/... First Name Middle Name (optional) Surname/Family Name

Email: _____ Phone: _____ Occupation: _____

Spouse:

Name: _____ Religion: _____
Mr/Mrs/Ms/... First Name Middle Name (optional) Surname/Family Name

Email: _____ Phone: _____ Occupation: _____

Marital Status: ☐ Catholic Marriage / ☐ Other Church / ☐ Civil / ☐ Other: _____

Address:

_____ Street Address _____ City _____ Postal Code _____
Unit # or Apartment #

Children 17 years and under: Please inform us if your child(ren)

First Name	Middle Name (optional)	Surname/Family Name	Date of Birth (Yr/Mo/Dy)	School	Baptised
_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>

Financial Contribution

How you would like your name(s) to appear on your tax receipt? _____
If not specified, your tax receipt will be issued jointly to the main registrant(s)/adult(s) listed above.

There are four ways to give. For more information, see the parish website at corpuschristi-edm.ca/donate



- ☐ I would like to receive a box of envelopes. (optional)
- ☐ I would like to contribute with an automatic withdrawal, using the [Pre-authorized Offering Program \(POP\)](http://corpuschristi-edm.ca/donate). (optional)

Ministry Service

- ☐ I am interested in serving in a ministry. The Ministry Coordinator can contact me to discuss how I can serve the parish.
- Preferred method of contact: ☐ Email ☐ Phone
- Preferred time: ☐ Weekdays after _____ before _____
☐ Weekends after _____ before _____

Thank you for registering. Welcome to our parish family!

The Catholic Parish of Corpus Christi

2707 34 Street NW, Edmonton, AB T6T 1P5

Phone: 780.466.7576

Email: corpuschristi.edm@caedm.ca

Website: corpuschristi-edm.ca

As a provincially incorporated body, The Catholic Archdiocese of Edmonton is required to act in accordance with the Alberta Personal Information and Protection of Privacy Act (PIPA) which establishes the standards as to the collection, use and disclosure of personal information.

For Office Use Only: Reg. Date: _____ [☐ CB ☐ PF ☐ VC ☐ EP] Env/POP No.: _____