Parish Registration / Census 2025-2026

Be counted! *All Catholics across the Archdiocese of Edmonton are asked to be counted at whichever parish you consider to be "home".*

Already registered? *Submitting this form will confirm for us that you are still worshipping here, and provide us with updated information about your family. Many families are surprised to learn that they have been coming to Corpus Christi for years, but were never officially registered. We look forward to having an accurate parish listing, that properly reflects the community we serve.*

New to the parish? *We are delighted to have you join us! During the census period, this form also serves as our Parish Registration form.*

Please return your completed census form to the parish in person or by email at **Census.CorpusChristi.Edm@caedm.ca**

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 / ☐ Single / ☐ Other: _____

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

Children 17 years and under *(Any adult children, please complete a separate census form.)*

First Name	*Surname/Family Name*	*Date of Birth (Yr/Mo/Dy)*	*School*	*Sacraments Received:* Baptism	1st Holy Eucharist (Communion)	Confirmation
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

Financial Contributions - 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 ➡

If you aren't already set up with a set of envelopes, or on POP, please indicate below if we can assist you.

☐ I would like to receive a box of envelopes. *(optional)*

☐ I would like to contribute by automatic withdrawal, using the Pre-authorized Offering Program (POP). *(optional)*

Ministry Service - *We hope you will consider serving within the parish community, if you aren't already!*

☐ 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 ☐ Home Phone ☐ Cell Phone

Preferred time: ☐ Weekdays after _____ before _____

☐ Weekends after _____ before _____

Thank you for making your parish home with us. We are happy to officially count you among us!

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

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

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.

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