



Parish Membership Registration

We hope that this faith community will be an important part of your life. In order to be of service to you, we the parish team at Holy Family would like to know who you are by asking you to fill out the following registration form. Please put the completed form in the collection basket, give to an Usher or turn into the parish office. Thank you.

Date: _____ Are you new to the Parish? Yes _____ No _____

Family Name: _____

Address: _____ Postal Code: _____

Home Phone: _____ Cell Phone(s): _____

Email(s): _____

Mr. _____ (please give first and middle names)

Religion: _____ Occupation: _____

Mrs./Ms: _____ (please give first and middle names)

Religion: _____ Occupation: _____

Dependents: (under 18) Please include first and middle names: (Continue on the back page, if you need more space)

Name:	DOB: (yyyy/mm/dd)
_____	_____/_____/_____
_____	_____/_____/_____
_____	_____/_____/_____
_____	_____/_____/_____

What are your hobbies, interests or special skills that you feel might be helpful to the life of the parish?

Would you like to receive envelopes or give through preauthorized debit? Please contact the office for further details.

*Our Mission is to live in the Spirit of the Holy Family
75 Poirier Ave. St. Albert, AB T8N 6A1*

Email: hfp@holyfamilyparish.ca
Website: www.holyfamilyparish.ca

Office: 780-459-3694
Fax: 780-460-4239