

WELCOME to St. Thomas the Apostle Parish

This information is kept confidential and will be used for parish records only.

Adult 1 Male () Female () Mr. / Mrs. / Ms. / Miss / Dr.	Adult 2 Male () Female () Mr. / Mrs. / Ms. / Miss / Dr.
Last Name	Last Name
First Name	First Name
Birth Date Religion	Birth Date Religion
Baptized: Yes □ No □ Confirmed: Yes □ No □	Baptized: Yes \square No \square Confirmed: Yes \square No \square
Maiden Name	Maiden Name
Occupation	Occupation
Marital Status: Single □ Married □ Co-habitating □	Separated / Divorced □ Widow □ Engaged □
	rriage:
Contact Information	
Street Address	Unit #/Apt. #
P.O. Box # City and Province	Postal Code
Phone Number: E	E-Mail:
	First Name: Male Female
·	Confirmed Grade Grade
	First Name: Male Female
Month / Day / Year	Confirmed Grade Grade
Last Name: I	First Name: Male Female
Date of Birth: Baptized \(\subseteq \text{Communion} \)	Confirmed Grade Grade
If children are not enrolled in Catholic School, are they enrolled in Would you like more information about any religious courses for cl	any religious instruction course? Yes \square No \square
Church Support	
Would you like to use Sunday Offering Envelopes?	Yes \square No \square Box #
Would you like information regarding Electronic Transf	
If you are requesting a boxed set of envelopes, you	can pick up the following week at the Welcome Centre
Please introduce yourself to one of our Parish	Team members. We look forward to meeting you.