

Holy Name Parish
71 Gough Ave.
Toronto, Ontario M4K 3N9

REGISTRATION FORM

Name			
_____	_____	_____	_____
First Name	Family Name	First Name of Spouse	Family Name of Spouse (if different)
_____	_____	_____	_____
Child	Child	Child	Child
Address			

Street			

City – Province – Postal Code			
Contact Information:			
Phone #:	_____	_____	_____
	Residence	Cell	Business
Email Address:	_____		
Envelopes:			
Would you like to use weekly offering envelopes ?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so, you may pick up your envelopes next Saturday or Sunday at the entrance of the church.			
Volunteering & Questions:			
Would you like to volunteer?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Welcome to the Holy Name Parish Family!