



Guardian Angels Roman Catholic Church
 10630 Creditview Road, Brampton, Ontario, L7A 0T4
 Tel. 905.970.9175

PARISH REGISTRATION FORM

Review Date: 21 JULY 2020

Welcome to GUARDIAN ANGELS PARISH. Our parish is part of the Roman Catholic Archdiocese of Toronto. The information you will provide is confidential and will only be used for purposes related to parish activities. We are governed by the privacy policy of the Archdiocese of Toronto. For more information, please visit <https://www.archtoronto.org/about-us/safe-environment/privacy-policy> **PLEASE PRINT CLEARLY** and mail completed form to gapparishoffice@gmail.com

DATE MMM-DD-YYYY New Parishioner Change of Information Moving → New Address: _____
Street Address City Prov Postal Code

HEAD OF HOUSEHOLD (Primary Contact)

Mr. Mrs. Miss Last Name _____ First Name _____ Religion _____
 Cell # _____ Home # _____ Email _____ Occupation _____
 Street Address _____ Apt./Unit # _____ City _____ Prov _____ Postal Code _____
 Date of Birth MMM-DD-YYYY Date of Catholic Baptism MMM-DD-YYYY Confirmation Date MMM-DD-YYYY
 Married: **YES / NO** Date of CATHOLIC Marriage MMM-DD-YYYY If not a Catholic Marriage, what denomination? _____

SPOUSE N/A

Mr. Mrs. Miss Last Name _____ First Name _____ Religion _____
 Cell # _____ Home # _____ Email _____ Occupation _____
 Date of Birth MMM-DD-YYYY Date of Catholic Baptism MMM-DD-YYYY Confirmation Date MMM-DD-YYYY

CHILDREN (Under 21) living in the above address. Note: Children above 21 & other adults living in the same household are advised to register separately

Last Name	First Name	M/F	Date of Birth	Relationship	Date of CATHOLIC Baptism	Date Confirmed
			<u>MMM-DD-YYYY</u>		<u>MMM-DD-YYYY</u>	<u>MMM-DD-YYYY</u>
			<u>MMM-DD-YYYY</u>		<u>MMM-DD-YYYY</u>	<u>MMM-DD-YYYY</u>
			<u>MMM-DD-YYYY</u>		<u>MMM-DD-YYYY</u>	<u>MMM-DD-YYYY</u>

How do you wish to support the parish?

- PAG** (Pre-Authorized Giving). Automatic withdrawal from your account every 20th of each month. **Please complete the PAG form**
- Pre-numbered envelopes. Please choose this option only if you intend to contribute every week (e.g., every Sunday). **OFFICE USE ONLY: Envelope #**
- Include both spouse names on tax receipt? **YES / NO**