New Parishioner's Information Form ☐

Existing Parishioner's Update Form ☐

(Please tick whichever box is applicable)

FAMILY SURNAME _____ DATE: _____

FAMILY ADDRESS _____

HOME PHONE _____   **FAMILY EMAIL** _____

PEOPLE LIVING AT THIS ADDRESS

PERSON 1

SURNAME		**CHRISTIAN NAME**	
DOB		**RELATIONSHIP TO PERSON 1**	**SELF**
OCCUPATION		**RELIGION**	
MOBILE		**EMAIL**	

PERSON 2

SURNAME		**CHRISTIAN NAME**	
DOB		**RELATIONSHIP TO PERSON 1**	
OCCUPATION		**RELIGION**	
MOBILE		**EMAIL**	

PERSON 3

SURNAME		**CHRISTIAN NAME**		
DOB		**RELATIONSHIP TO PERSON 1**		
SCHOOL NAME		**SCHOOL YEAR**		
BAPTISM	**YES/NO** **DATE:**	**CONFIRMATION**	**YES/NO** **DATE:**	
RECONCILIATION	**YES/NO** **DATE:**	**FIRST COMMUNION**	**YES/NO** **DATE:**	

PERSON 4

SURNAME			CHRISTIAN NAME		
DOB			RELATIONSHIP TO PERSON 1		
SCHOOL NAME			SCHOOL YEAR		
BAPTISM	YES/NO	DATE:	CONFIRMATION	YES/NO	DATE:
RECONCILIATION	YES/NO	DATE:	FIRST COMMUNION	YES/NO	DATE:

PERSON 5

SURNAME			CHRISTIAN NAME		
DOB			RELATIONSHIP TO PERSON 1		
SCHOOL NAME			SCHOOL YEAR		
BAPTISM	YES/NO	DATE:	CONFIRMATION	YES/NO	DATE:
RECONCILIATION	YES/NO	DATE:	FIRST COMMUNION	YES/NO	DATE:

PERSON 6

SURNAME			CHRISTIAN NAME		
DOB			RELATIONSHIP TO PERSON 1		
SCHOOL NAME			SCHOOL YEAR		
BAPTISM	YES/NO	DATE:	CONFIRMATION	YES/NO	DATE:
RECONCILIATION	YES/NO	DATE:	FIRST COMMUNION	YES/NO	DATE:

Would you like to be involved in ministry groups within our parish community?
(Please indicate which and we will provide more details.)

Adult Altar Servers	☐	Ministry to the Sick	☐	Children's Liturgy	☐
Jnr Altar Servers	☐	RCIA	☐	Youth Group	☐
Eucharistic Minister	☐	Ecumenical Team	☐	Young Adults	☐
Reader at Mass	☐	Social Justice Group	☐	Playgroup	☐
Choir	☐	St Vincent de Paul	☐	Catechist	☐
Organist/Musician	☐	Meditation Group	☐	Bell ringing	☐
Sunday Morning Tea	☐	Scripture Study	☐	Dads' group	☐
Money Counter	☐	Social Committee	☐		

Please hand the completed form at the Parish Office, email to parish@lindfieldkillara.org.au, or post to PO Box 22 Lindfield, NSW 2070.