Parish of St. Leonard

2017 Registration Form

5310 Union Highway, River Ryan, NS B1H 1B2 Phone (902) 862-2255 Fax (902) 862-7110 Parish website: <u>www.parishofsaintleonard.com</u> Email: <u>pastoralcentre@parishofsaintleonard.com</u>

Personal Information

Family Name:			
Mailing Name:		Date:	
Mailing Address:	Hor	me Phone:	
City/Province	Po	ostal Code:	

For Each Family Member, list the details on each person, start with the Envelope Holder, include all children, or other relatives living in the same household/family.

	Family Member					
Last Name						
First Name						
Middle Names						
Gender M / F	□ Male/Female □					
Date of Birth						
Marital Status						
Family Relation						
Parishioner Y / N	□ Yes/No □					
Envelope #						
Religion						
Occupation						
Business Phone						
Business Fax						
Cell Phone						
School						
Email Address						
Maiden Name						
If you are not presently using Contribution Envelopes, would you like to receive a box?						

The Parish of Saint Leonard will maintain appropriate safeguards to ensure the security, integrity and privacy of your personal data. Personal information will not be shared with any other persons, groups or organizations. Completion of any/all information requested is strictly voluntary.