

ST RAPHAEL'S PARISH REGISTRATION FORM

	ROAD	SURNAME	
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ADDRESS	
TOWN	
POSTCODE	
PREFERRED TELEPHONE NUMBER	
PREFERRED E-MAIL ADDRESS	

PLEASE INSERT BELOW YOUR FULL NAME AND THE NAMES OF MEMBERS OF YOUR HOUSEHOLD
 (One name per strip; household members over 16 may complete their own, separate form if they wish)

Title	First Names			Surname	
Date of Birth (Dy, Mth, Yr)		Gender	M / F		Hobbies / skills which could be useful to the parish / current work in parish
Marital status		First Holy Communion	Y / N		
Date married (Dy, Mth, Yr)		Confirmed	Y / N		
Religion				Current occupation / University / College / School	

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The information held in this form and in parish records is confidential and is subject to the Data Protection Act. You have right of access to this information under the provisions of that Act.

Signature