

# INFANT JESUS PARISH MEMBERSHIP FORM



## HOUSEHOLDER ONE

Title Dr / Mr / Mrs / Ms / Mas / others: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 Family/Surname: \_\_\_\_\_ Marital Status : \_\_\_\_\_  
 Given Name(s): \_\_\_\_\_ Wedding Date: \_\_\_\_\_  
 Maiden Name: \_\_\_\_\_ Ethnic Background: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Language Spoken at Home: \_\_\_\_\_  
 Country of Birth: \_\_\_\_\_ Parish Involvement: \_\_\_\_\_  
 Religious Denomination: \_\_\_\_\_  
 Baptised  \_\_\_\_\_  
 First Eucharist  \_\_\_\_\_ How long have you lived in the parish? \_\_\_\_\_ years  
 Confirmed  \_\_\_\_\_ or since: \_\_\_\_\_

Preferred Title & Name(s) for Mail: \_\_\_\_\_  
 Address: \_\_\_\_\_ Suburb & Postcode: \_\_\_\_\_  
 Email: \_\_\_\_\_ Parish Status: R / A / O  
 Phone Home: \_\_\_\_\_ Phone Work: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 (please inform if silent numbers apply)  
 Names of adults at address (other than Householder 2): \_\_\_\_\_

## HOUSEHOLDER TWO

Title Dr / Mr / Mrs / Ms / Mas / others: \_\_\_\_\_ Email: \_\_\_\_\_  
 Family/Surname: \_\_\_\_\_ Phone Work: \_\_\_\_\_  
 Given Name(s): \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Maiden Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Ethnic Background: \_\_\_\_\_  
 Country of Birth: \_\_\_\_\_ Parish Involvement: \_\_\_\_\_  
 Religious Denomination: \_\_\_\_\_  
 Baptised  \_\_\_\_\_  
 First Eucharist  \_\_\_\_\_  
 Confirmed  \_\_\_\_\_

## DETAILS OF CHILDREN LIVING AT HOME (REGARDLESS OF AGE)

Name of Child	Birth Date	Country of Birth	Gender	Sacraments Received				Name of School/ Occupation	Parish Involvement
				Bapt	Rec	Euch	Conf		
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	

## PLANNED GIVING

Currently Enrolled

*I would like to enrol in the Planned Giving Programme and Pledge:*  
 a Contribution of \$ ..... weekly / monthly  
 or an Annual Amount of \$ .....  
 I wish to make my weekly/monthly contribution by direct debit: Yes / No

Signature.....  
Date.....

## ADDITIONAL INFORMATION

Is there anyone housebound living in your home? Yes / No  
 If yes, would they care to receive any home visits? \_\_\_\_\_ (e.g. for sacraments, pastoral care etc)  
 Name of housebound: \_\_\_\_\_  
 Other comments: \_\_\_\_\_

## VOLUNTEER OPPORTUNITIES

Our Parish community has many opportunities for you to use your skills, exercise your mind or body with light (or slightly heavier!) duties, or simply while away some time in a happy environment. Please contact our office on 9276 8500 for further details.

## WHAT ARE YOUR GIFTS?

Do you have any skills or special talents that you would be able to share with your parish community? It may be your work, or a particular hobby or pastime. We would like to hear about it .....

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