OUR LADY OF PERPETUAL HELP PARISH

2465 Crown Street, Vancouver, B.C. V6R 3V9

(604) 224-4344 ♦ parish.olph@rcav.org ♦ www.olphchurch.ca

REGISTRATION FORM

Primary Member

Surname: _____ First Name: _____

Date of Birth: _____ Gender: _____
(month/date/year)

Occupation: _____ Email: _____

Work Tel.: _____ Cellular: _____

Marital Status:
- Single _____
- Married _____
- Separated _____
- Divorced _____
- Widowed _____

Religion: Roman Catholic _____

Sunday offerings by:
Envelopes ☐ PAD/Credit Card ☐ Env # _____

Do you wish to subscribe to the B.C. Catholic?
☐Yes ☐No

Tax Receipt to be issued to:
(name of parishioner)

Secondary Member

Surname: _____ First Name: _____

Date of Birth: _____ Gender: _____
(month/date/year)

Occupation: _____ Email: _____

Marital Status:
- Single _____
- Married _____
- Separated _____
- Divorced _____
- Widowed _____

Religion:
- Roman Catholic _____
- Anglican _____
- Protestant _____
- Other Christian _____
- Other Religion _____

Address: _____

City: _____ Province: _____

Postal code: _____ Home Tel.: _____

Over →

Children

1. Surname: _____ First Name: _____

Date of Birth: _____ Gender: _____
(month/date/year)

School: _____ Grade: _____

Religion: _____

Baptised: Yes / No Reconciliation: Yes / No

Confirmed: Yes / No Communion: Yes / No

2. Surname: _____ First Name: _____

Date of Birth: _____ Gender: _____
(month/date/year)

School: _____ Grade: _____

Religion: _____

Baptised: Yes / No Reconciliation: Yes / No

Confirmed: Yes / No Communion: Yes / No

3. Surname: _____ First Name: _____

Date of Birth: _____ Gender: _____
(month/date/year)

School: _____ Grade: _____

Religion: _____

Baptised: Yes / No Reconciliation: Yes / No

Confirmed: Yes / No Communion: Yes / No

- Income tax receipts can be issued only to those who contribute by envelopes or PAD/credit card.
- Reduced tuition applies only to those who contribute to OLPH Parish by envelopes or PAD/credit card.

Registration form received on: _____ *Posted on ParishSOFT:* _____