



St. Ignatius Loyola

Roman Catholic Church

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PARISH FAMILY REGISTRATION

Name: _____			
First Name	Family Surname		
Spouse: _____			
First Name	Last Name, if different		
Address: _____			
Suite/Apt#	Street Number and Name	City	Postal Code
Telephone: Home: _____		Cell Phone: _____	
Email Address: _____			

Children(s) Information

***Please exclude married children or children not residing at your home.*

Name	Date of Birth <small>(mm/dd/yyyy)</small>	Baptism	
_____	_____	Yes	No
_____	_____	Yes	No
_____	_____	Yes	No
_____	_____	Yes	No

Marital Status

Married Single Widowed Divorced Separated

Name of Former Parish: _____

Were you involved in any Ministries? (Please list)

Please register me for Monthly Pre-Authorized Giving Plan: Yes No PAG Pkg Given: _____

Date of Registration: _____ Envelope Number: _____
(mm/dd/yyyy)

Office Use Only: _____