| For office use only | |
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| Date of registration | |
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ST MICHAEL'S CHURCH, ASHFORD PARISH REGISTRATION FORM

Please complete this form in order to be included in the Parish Register. (A parishioner is any person, Catholic or non-Catholic, who regularly attends Mass at St Michael's Church)

PLEASE USE BLOCK CAPITALS

ADDRESS

| ADDRESS | | | |
|-------------------------------|---|--|------------------------|
| | | | |
| | | | |
| POST CODE | | | |
| TELEPHONE NO | | | |
| EMAIL | | | |
| Title (Mr/ Mrs) First Name | Surname | Date of Birth (if under 18) | Catholic (Yes/ No) |
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| Do you have a skill o | r expertise that you would be will | ling to share with the Parish | ? Please give details. |
| | | | |
| Ana you interested in | halning in ANV way as a Davishi | ionor? Diogga givo dotaila | |
| Are you interested in | helping in ANY way as a Parishi | ioner? Please give details. | |
| Dreat acting your private | v Vour personal details will be held or | a file lateral on the nariah as were the | er accurate If you |

Protecting your privacy. Your personal details will be held on file/stored on the parish computer securely. If you identify a skill or expertise above, we may contact you requesting your assistance. You can read the official Diocesan Privacy Policy on rcdow.org.uk/diocese/privacy-policy.