### NEWCOMERS ARE ENCOURAGED TO FILL OUT AND RETURN THIS PAGE

### **PARISH CENSUS INFORMATION**

Church you normally attend [Please tick] HOLY

HOLY EUCHARIST

ST. MARY'S

| SURNAME          |         |                 |          |            |                      |            |  |
|------------------|---------|-----------------|----------|------------|----------------------|------------|--|
| Address          |         |                 |          |            |                      |            |  |
| SUBURB           |         |                 |          |            | POSTCODE             |            |  |
| PHONE            |         |                 | EMAIL    |            |                      |            |  |
| Title            | First / | Christian Names | Religion | , D.       | Occupation           | Occupation |  |
|                  |         |                 |          |            |                      |            |  |
|                  |         |                 |          |            |                      |            |  |
| Children at home |         |                 |          | Birth Date | Occupation or School |            |  |
|                  |         |                 |          |            |                      |            |  |
|                  |         |                 |          |            |                      |            |  |
|                  |         |                 |          |            |                      |            |  |
|                  |         |                 |          |            |                      |            |  |
|                  |         |                 |          |            |                      |            |  |
|                  |         |                 |          |            |                      |            |  |

# Parishioners are encouraged to support the work of the parish through our <u>WEEKLY OFFERING ENVELOPES</u>

If you would like a set of weekly offering envelopes or would like to make your contribution via your Credit Card or a Direct Debit please fill in the details on the back of this form and return it to the parish office

**<u>SCHOOL ENROLMENTS</u>**: Parents are reminded that entry to our parish school is based on the boundary or zone of our parish and parishioners or families who live outside the parish boundary will normally always be referred to the parish school in which zone or parish they reside. Any concerns about this issue need to be taken up with the Parish Priest.

If you would like to receive more information concerning any of the following please tick the appropriate boxes:

- **D** Sacristans
- **2** Reading at Mass
  - Extraordinary Minister
- **D** Home Communion
- Counters
- St. Vincent de Paul
- Choir & Music
- Altar Servers
  - Children's Liturgy

- 1<sup>st</sup> Friday Anointing Mass
- Parish Family Groups
- Care Group
- **D** Tennis Club
- **W**orking Bees
- **D** Maintenance
- Infant Baptism
- Adult Baptism
- **G** Social Events

*Please hand this page to the parish priest or place it in the collection plate at Mass Please be assured that all information will only be used in terms of our Parish Privacy Policy* 

## **Parish Thanksgiving Program**

The ministry and mission of our parish depend on the regular offering of the people of God.

Please fill out the following details if you wish to contribute through our Thanksgiving Program.

| Name:  | (PLEASE PRINT)                            |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| Address:   |   |  |  |  |  |  |  |
| Phone:   |   |  |  |  |  |  |  |
| Church you normally attend [ <i>Please tick</i> ] Holy Eucharist D St. Mary's D<br>I am / we are [ <i>Please tick</i> ] New parishioner/s D Existing parishioner/s D |   |  |  |  |  |  |  |
| I shall try to contribute \$ week<br>or month<br>or quarte<br>Choose [and tick] one of the following options:  | hly 📿                                     |  |  |  |  |  |  |
| Option 1:  |   |  |  |  |  |  |  |
| I would like a set of WEEKLY OFFERING ENVELOPES  |   |  |  |  |  |  |  |
| Option 2:  |   |  |  |  |  |  |  |
| ☐ I would like to contribute by CREDIT CARD  | I would like to contribute by CREDIT CARD |  |  |  |  |  |  |
| Please tick: Visa 2 Mastercard 2 Expiry date   |   |  |  |  |  |  |  |
| Name on Card [PRINT]   |   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| Please debit my credit card account on thed  | lay of each month 🛛<br>or quarter 🗳       |  |  |  |  |  |  |
| with the sum of \$   |   |  |  |  |  |  |  |
| I understand that this authority may be cancelled or altered by me in writing at any time.   |   |  |  |  |  |  |  |
| Signature Date   |   |  |  |  |  |  |  |

#### **Option 3:**

I would like contribute by DIRECT DEBIT
If you tick this box an authorisation form will be mailed to you.

### You can return this form by placing it in a sealed envelope marked 'Parish Secretary' and:

- putting it in the collection plate at Mass; or dropping it into the Presbytery;
  - or mailing it to: The Presbytery, 91 Manning Rd., Malvern East. 3145