

# Holy Redeemer Parish

44 Rothesay Drive, Kanata, On. K2L 2X1  
613-836-1764

## REGISTRATION FORM

FAMILY NAME \_\_\_\_\_ Phone No. \_\_\_\_\_ Cell No. \_\_\_\_\_

ADDRESS \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

HUSBAND \_\_\_\_\_ Religion \_\_\_\_\_

Occupation \_\_\_\_\_

WIFE \_\_\_\_\_ Religion \_\_\_\_\_

Occupation \_\_\_\_\_

Email address: \_\_\_\_\_

### NAMES OF CHILDREN & OTHER FAMILY MEMBERS LIVING AT HOME

NAME	DATE OF BIRTH (Month, date, year)	SCHOOL OR OCCUPATION
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### WOULD YOU LIKE TO BECOME A MEMBER OF:

#### Liturgy:

\_\_\_\_\_ Extra-ordinary Ministers of Communion  
\_\_\_\_\_ Ushers  
\_\_\_\_\_ Lectors  
\_\_\_\_\_ Music Ministry  
\_\_\_\_\_ Children's Liturgy

#### Education:

\_\_\_\_\_ RCIA  
\_\_\_\_\_ Adult Faith Development  
\_\_\_\_\_ Marriage Preparation  
\_\_\_\_\_ Baptism Preparation  
\_\_\_\_\_ Christian Initiation of Children

#### Social Mission:

\_\_\_\_\_ Food Cupboard  
\_\_\_\_\_ Pro-Life  
\_\_\_\_\_ Development & Peace  
\_\_\_\_\_ St. Vincent de Paul

#### Parish Life:

\_\_\_\_\_ Knights of Columbus  
\_\_\_\_\_ Legion of Mary  
\_\_\_\_\_ Pastoral Care Team

#### Youth:

\_\_\_\_\_ Youth Leader

I would like a box of donation envelopes

Yes

No