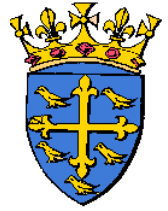




OUR LADY OF GRACE AND ST. EDWARD

The Presbytery,
247 High Road,
Chiswick, London W4 4PU
Telephone 020 8994 2877
Facsimile 020 8987 8332



REGISTRATION OF NEW PARISHONERS

PLEASE PRINT IN BLOCK CAPITALS

Mr/Mrs/Ms/(Other____) First Name _____ Surname _____

Maiden Name (if applicable) _____ Are you? Male Female

Name of Husband/Wife/ Partner **(or Next of Kin)** _____

Address _____ (_____)

(Area+ Ward if know) _____ (_____)

(City/ Postcode) _____ (_____)

Telephone Number _____ (_____)

E-mail _____ (_____)

Date of Birth _____ (**↑ for Next of Kin if different↑**)

Nationality (if not British) _____

Nationality of other family members _____

How would you describe yourself (Y) and your Husband/ Wife/ Partner (P)?:

| | (Y) | (P) | | (Y) | (P) |
|-------------------|--------------------------|--------------------------|-----------------|--------------------------|--------------------------|
| Baptised Catholic | <input type="checkbox"/> | <input type="checkbox"/> | Other Christian | <input type="checkbox"/> | <input type="checkbox"/> |
| Baptised Anglican | <input type="checkbox"/> | <input type="checkbox"/> | Other Faith | <input type="checkbox"/> | <input type="checkbox"/> |
| Baptised Orthodox | <input type="checkbox"/> | <input type="checkbox"/> | Enquirer | <input type="checkbox"/> | <input type="checkbox"/> |

Have you received the Sacrament of:

First Holy Communion? Confirmation Marriage

Date of Marriage _____

If you would like to help in any of the ministries listed below please place a tick in the box next to it (**if you are already involved, please tick twice**):

| | | | |
|-----------------|--------------------------|--|--------------------------|
| Catechist | <input type="checkbox"/> | Parish Social Care (eg transportation) | <input type="checkbox"/> |
| Church Cleaning | <input type="checkbox"/> | Hospitality | <input type="checkbox"/> |
| Crèche | <input type="checkbox"/> | Music Group | <input type="checkbox"/> |

CONFIDENTIAL

Eucharistic Minister Reader

If you would like to help in any of the ministries listed below please place a tick in the box next to it, or indicate any other activity you would like to take part in:

Finance Committee Youth Club Helper
 Flowers/Garden Other (please state) _____

Do you have any work skills that you may be willing to offer the Parish (eg. finance, plumbing, building, first aid)? Please list

.....

| Child's Name (Children under 18 only) | Date of Birth | M/F | Baptised (tick) | Communion (tick) | Confirmed (tick) | School |
|--|---------------|-----|--------------------|---------------------|---------------------|--------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Please indicate your preferred method of contact:

Post E-mail Telephone

I am a member of the Gift Aid scheme I would like to join the Gift Aid scheme

Signed _____ Date _____

Thank you for your time.

In accordance with the Data Protection Act:

1. we are obtaining this information with your consent and the consent of the other people named
2. this information will be only for the legitimate Parish/ Diocesan use of keeping members details
3. we will only obtain information for Parish/ Diocesan records fairly and lawfully
4. we will keep our records accurate and up-to-date
5. records will be kept secure and confidential
6. information will only used for Parish/ Diocesan business

You have the right to:

1. see information stored about yourself
2. have it corrected if it is wrong
3. claim compensation in some cases

The Data Protection Act covers data stored on paper, as well as purely electronic data.