OUR LADY OF VICTORY PARISH

1607 Birch St, Whitehorse YT Y1A 3X1 Phone: (867) 633-26477

PARISH REGISTRATION AND CONSENT FORM

(PLEASE WRITE IN BLOCK LETTERS)

Name: _____

Spouse (if applicable): _____

Children (if 18 years or older, please fill another Member Information sheet):

_____, **Age:** _____

_____, **Age:** _____

_____, **Age:** _____

_____, **Age:** _____

Mailing address: _____

_____

Phone number: _____ **Cell:** _____

Email address: _____

Canadian citizen ◯ yes or ◯ no **(please circle one)**

Sacramental Marriage **Civil Marriage** **Common Law** **(please circle one)**

Year of Baptism: _____

Year of confirmation: _____

Year of Marriage: _____

Sunday Collection:

If you are not currently using Sunday collection envelopes and would like a box, please come by our rectory to request one. If you already have a box number, please indicate it below:

BOX # _____

What would you need or would like to see Our lady of victory?

Sacramental preparation? Please indicate which sacraments you or someone in your family are interested in:

_____

_____

_____

_____

_____

Other services or activities? Please explain**:**

_____

_____

_____

Signature……