



Parish Registration Form

All members of the parish of St Mary Magdalen are requested to complete one of these forms to ensure that the parish records are updated with their personal and contact details. This information will be held securely in the parish office and used solely for the purposes of parish administration and to communicate with parish members.

Family Name:			First Name:	
Address:			Spouses Name:	
		Contact No.:		
Postcode			Email:	

Please list all other members of your family living at this address.

First Name	Date of birth DD/MM/YY	Contact Number	Email		School (Child only)	Baptised _{Y/N}	Confirmed Y/N	
Mass normally attended at St Mary Magdalen church:								
Saturday 6:00 pm	Vigil Mass	Sunda	ay 8:00 am	Sunday 10:00 a	am			
I am housebound I would like a home visit: from a priest from a Eucharistic Minister								
How I can help the church: Please tick all boxes that apply to indicate how you would be willing and able to support your parish.								
Cleaning	Altar ser	ving Ch	noir	Property Maintenance	e			
Music	Catechis	t 15	0 Club	Flower arranging	Tea/c	offee		
Reading	Collectio	ns Ga	ardening	Offertory procession				
I have a skill/trade which I can offer for the benefit of the church Please specify								

I would like to make a Gift Aid declaration in respect of the offerings I make to the parish.

I consent to St Mary Magdalen Catholic Church storing my personal details entered on this form and using that information as necessary for the purposes of administering parish activities and communicating with parishioners. I understand that the information given will he held securely and, save only for the purpose of completing Diocesan returns, not shared with any other party, for any reason whatsoever.

Signed:	Date:	

The parish of St Mary Magdalen is GDPR compliant and adheres to national and Diocesan privacy guidelines