



ST. BARTHOLOMEW PARISH

59 Heather Road, Scarborough, Ontario M1S 2E2 | 416-291-5250 | st.barts@archtoronto.org



PARISHIONER REGISTRATION FORM

Information is used only by St. Bartholomew Parish for pastoral care and will not be shared. **PLEASE PRINT CLEARLY.**

Date: _____		☐ New registration		☐ Registration update		☐ Attend but not registered	
1. HOUSEHOLD INFORMATION							
Street Address:		Apt./Unit #:		City:		Postal Code:	
Home Phone:		Language(s) Spoken at Home:					
2. ADULT CONTACT INFORMATION							
PRIMARY CONTACT ☐ Mr. ☐ Mrs. ☐ Miss ☐ Dr.				SPOUSE / SECOND ADULT ☐ Mr. ☐ Mrs. ☐ Miss ☐ Dr.			
Last Name:		First Name:		Last Name:		First Name:	
Date of Birth (mm/dd/yy):		Religion:		Date of Birth (mm/dd/yy):		Religion:	
Sacraments: ☐ Baptism ☐ 1st Communion ☐ Confirmation				Sacraments: ☐ Baptism ☐ 1st Communion ☐ Confirmation			
Occupation:				Occupation:			
Home Phone:		Cell Phone:		Home Phone:		Cell Phone:	
Email Address:				Email Address:			
Marital Status: ☐ Single ☐ Engaged ☐ Married ☐ Separated ☐ Divorced ☐ Widowed				Marriage: ☐ Catholic ☐ Other denomination ☐ Civil			
Marriage Date (mm/dd/yy):				Church and/or Place of Marriage:			
3. CHILDREN'S INFORMATION — MINORS UNDER 18 ONLY							
CHILDREN / DEPENDANTS BELOW 18 YEARS OLD (MINORS) ONLY. Anyone 18 or older should complete a separate registration form.							
#	Full Name	Date of Birth	Religion	Baptism	1st Communion / Confirmation		
1				☐	☐ 1st Communion ☐ Confirmation		
2				☐	☐ 1st Communion ☐ Confirmation		
3				☐	☐ 1st Communion ☐ Confirmation		
4. OFFERTORY INFORMATION							
Would you like your own box of parish offertory envelopes? ☐ Yes ☐ No							
Pre-Authorized Giving (PAG) — encouraged: ☐ Yes ☐ No				Tax receipt in both spouses' names: ☐ Yes ☐ No			
STEWARDSHIP: We encourage every registered household to support the mission of St. Bartholomew Parish through Offertory Envelopes, Pre-Authorized Giving (PAG), or Donate Now. Your faithful generosity helps sustain our parish, its ministries, and outreach, and is a meaningful way to participate in the life of our parish community.							
5. PARISH INVOLVEMENT							
Previous parish ministry experience: ☐ Yes ☐ No							
☐ Ministers of Hospitality ☐ Children's Liturgy ☐ Extraordinary Ministers of Communion		☐ Counters ☐ Altar Society ☐ Shut-in/ Extraordinary Ministers to the sick and homebound		☐ Lectors ☐ Music Ministry (Choir) ☐ Others: _____			

RETURN THIS FORM: Email it to the parish office or place it in the collection basket. We will confirm receipt by email and let you know when your offertory envelopes are ready for pickup at the parish office. **Please provide an active email address, as most parish communication is sent by email.** We encourage you to enroll in Pre-Authorized Giving (PAG); the PAG form is available on our website.

FOR OFFICE USE ONLY

Date Received: _____

Envelope #: _____