

ST. THOMAS SYRO-MALABAR CATHOLIC FORANE PILGRIM CHURCH - SCARBOROUGH



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ADDRESS CHANGE / PROFILE UPDATE FORM

Please send both completed forms to: office@stthomasparishca.com

**KINDLY FILL IN ALL FIELDS ALONG WITH YOUR ENVELOPE NUMBER AND SIGNATURE*

ENVELOPE NUMBER : _____ SIGNATURE : _____

First Name:			Middle Name:		
Last Name:					
New Address:					
City:		Postal Code:			
Home Phone:		Cell Number:			
Email Address:					
Date of Birth: (dd/mm/yy)	Date of Baptism : (dd/mm/yy)		Date of Marriage : (dd/mm/yy)		
Previous Address:					
We have been at this new address since:					
Current status in Canada (Student/Work Permit/P.R/Citizen) :					

SPOUSAL INFORMATION

First Name:		
Last Name:		Email:
Date of Birth (dd/mm/yy)		Date of Baptism: (dd/mm/yy)

DETAILS OF CHILDREN AND OTHER DEPENDENTS

1.	(FIRST)	(MIDDLE)	(LAST)	Date of Birth (dd/mm/yy)	Date of Baptism : (dd/mm/yy)
2.	(FIRST)	(MIDDLE)	(LAST)	Date of Birth (dd/mm/yy)	Date of Baptism : (dd/mm/yy)
3.	(FIRST)	(MIDDLE)	(LAST)	Date of Birth (dd/mm/yy)	Date of Baptism : (dd/mm/yy)
4.	(FIRST)	(MIDDLE)	(LAST)	Date of Birth (dd/mm/yy)	Date of Baptism : (dd/mm/yy)