



St. Justin Martyr Parish

Parish Registration Form

Print information clearly.

Mr.

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First Name

Last Name

Ms./Mrs.

--	--

First Name

Last Name

Address

--	--	--

Number

Street

Unit No.

--	--

City

Postal Code

Home No.

	Mobile No.	
--	-------------------	--

Email Address

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Would you prefer to make St. Justin's your Home Parish?

☐

Yes

☐

No

Details of extended family members; children, parents etc.

Given Name	Last Name	Date of Birth (DD/MM/YYYY)	Gender M/F	Relationship Son/Daughter/ Parent etc.

FOR OFFICE USE ONLY

Envelope Number

Registered on

3898 Highway #7 East, Unionville, Ontario L3R 1L3
Tel: (+1) 905.479.2463 Email: stjustinmartyrun@archtoronto.org
Web Site: stjustinmartyrun.archtoronto.org