

New Parishioner Registration Form

St. Aidan's Roman Catholic Church

3501 Finch Ave. East, Scarborough, ON M1W 2S2

Tel: 416-494-2704 Email: StAidansSC@archtoronto.org

Website: staidanssc.archtoronto.org

(Please Print Clearly)

Last Name: _____ First Name: _____

Spouse's Name: _____

Children:

_____ D.O.B.: _____

_____ D.O.B.: _____

_____ D.O.B.: _____

_____ D.O.B.: _____

_____ D.O.B.: _____

_____ D.O.B.: _____

Address: _____

Postal Code: _____ Phone: _____ Email: _____

Occupations: _____

Do you have any areas of expertise you wish to share with the Parish?

If you are willing, would you share why St. Aidan`s is important to you as a Parish?

I would like to volunteer for (check off all that apply):

- Communion for the Sick
- Marriage Preparation
- Confirmation Volunteer
- Eucharistic Minister
- Minister of Hospitality (Usher)
- Lector
- RCIA Sponsor

I would like to participate in (check off all that apply):

- Catholic Women's League
- Legion of Mary
- St. Vincent de Paul Society
- Knights of Columbus

Please indicate your Mass preference:

- Weekdays
- Saturday, 5:00 p.m.
- Sunday, 9:00 a.m.
- Sunday, 10:30 a.m.
- Sunday, 12:00 p.m. (noon)