



St Jerome's Parish Spearwood Membership Form

HOUSEHOLDER 1

Title Dr/Mr/Mrs/Miss/Ms/Mas/others: Occupation:
Family/Surname: Marital Status:
Given Name(s): Wedding Date:
Maiden Name: Ethnic Background:
Date of Birth: Language spoken at Home:
Country of Birth: **Parish Involvement:**
Religious Denomination:
Baptised:
First Eucharist: How long lived in parish?:
Confirmed:

Preferred Title & Name for Mail:
Address: Suburb & Postcode:
Email: Fax:
Phone Home: Phone Work: Mobile:
Names of adults at address (other than Householder 2):

HOUSEHOLDER 2

Title Dr/Mr/Mrs/Miss/Ms/Mas/others: Email:
 Family/Surname: Phone Work:
 Given Name(s): Mobile:
 Maiden Name: Occupation:
 Date of Birth: Ethnic Background:
 Country of Birth:
 Religious Denomination:
 Baptised: **Parish Involvement:**
 First Eucharist:
 Confirmed:

Details of Children at Home (regardless of age)

Name of Child	Birth Date	Country of Birth	Gender	Bapt	Rec	Each	Conf	Name of School/ Occupation	Parish Involvement
.....	<input type="checkbox"/>	... <input type="checkbox"/>	... <input type="checkbox"/>	... <input type="checkbox"/>
.....	<input type="checkbox"/>	... <input type="checkbox"/>	... <input type="checkbox"/>	... <input type="checkbox"/>
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.....	<input type="checkbox"/>	... <input type="checkbox"/>	... <input type="checkbox"/>	... <input type="checkbox"/>

Planned Giving

Currently Enrolled

I would like to enrol in the Planned Giving Programme and Pledge:
 a Contribution of \$ Weekly / Fortnightly / Monthly / Quarterly / Twice Yearly / Yearly

I wish to make my contribution by Direct Debit: Yes / No
 I wish to make my contribution by Credit Card: Yes / No

Additional Information

Is there anyone housebound living in your home? Yes / No

If yes, would they care to receive any home visits? E.g. for sacraments, pastoral care, etc

Name:

Other Comments:

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