



To Know, love and serve Jesus
by sharing our gifts through our baptismal mission

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New Parishioners Registration Form

We wish to extend to you a warm welcome to Our Lady of Mount Carmel Parish. To be able to welcome you into the full life of our community we would like to get to know you a little more.

About Your Family

Family Name: _____ Home Phone: _____

Address: _____

Mobile: _____ Email address: _____

Current Parish (if any): _____

About Family Members

First Name/Christian Name	M/F	D.O.B.	Country of Birth	Occupation If Applicable	Sacraments Completed

Would you like to participate in the Planned Giving of the church? Yes No

If yes, would you prefer the envelope arrangement or a direct debit for your planned giving?

Hopes & Desires of your Family: _____
