

## Lourdes Matha Syro-Malabar Catholic Church

St. Thomas Syro-Malabar Catholic Diocese of Chicago

1400 Vision Drive, Apex, NC 27523 Phone: 919-439-0305 Fax 000-000-0000

### MEMBERSHIP REGISTRATION

NEW MEMBER ( ) UPDATE ( ) ID NO. \_\_\_\_\_ WARD NAME \_\_\_\_\_

FAMILY NAME: \_\_\_\_\_

HEAD OF THE FAMILY: \_\_\_\_\_

(Last Name) (First Name) (Middle Name)

ADDRESS: \_\_\_\_\_

(Street) (City) (State) (Zip)

PHONE: (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_ (E-Mail) \_\_\_\_\_

No	Family Member		Relationship	Year of Arrival	Date of Birth (mm/dd/yy)	Date of Baptism (mm/dd/yy)	Date of Confirmation (mm/dd/yy)	Date of Marriage (mm/dd/yy)	Home Parish	Home Diocese
	First Name	Last Name								
1										
2										
3										
4										
5										
6										

"Give, and it will be given to you; good measure, pressed down, shaken together, running over, they will pour into your lap." (Luke 6:38)

Building Mortgage Pledge		Regular Monthly Pledge \$50( ), \$75( ), \$100( ), \$ Other( )	
As per your yearly contributions \$.....		Suggested Minimum \$50 Per Month	
Bank Name		Bank Name	
Routing No		Routing No	
Account No		Account No	
Monthly Amt		Monthly Amt	
No of Months		No of Months	

I the undersigned agree to join the Parish and make regular payments to Lourdes Matha Syro-Malabar Catholic Church, 1400 Vision Drive, Apex, NC 27523

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_