



**CHRIST CHURCH
CATHEDRAL**
FREDERICTON NB

**Congregational List
Updates and Additions**

**168 Church Street
Fredericton NB E3B 4C9
(506) 450-8500
office at christchurchcathedral.com**

**Please fill, save and
email this document**

HOUSEHOLD

Household Name: _____

Postal Address: _____

Postal Code: _____

Telephone: _____

Wedding Anniversary: _____

E-mail: _____

We (I) wish to receive: Postal mailings E-mailings Newsletter(s)

Please enable household access to the online database for updates
(we'll send instructions by e-mail)

INDIVIDUALS

Full Name:	_____		
Personal E-mail:	_____		
Work E-mail:	_____		
Work Phone:	_____	Mobile Phone:	_____
Dates:	Birth <small>yy/mm/dd</small>	<input type="checkbox"/> Baptism <small>yy/mm/dd</small>	<input type="checkbox"/> Confirmation <small>yy/mm/dd</small>
Family Role:	<input type="checkbox"/> Head of Household <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other Relative <input type="checkbox"/> Other		

Full Name:	_____		
Personal E-mail:	_____		
Work E-mail:	_____		
Work Phone:	_____	Mobile Phone:	_____
Dates:	Birth <i>yy/mm/dd</i>	<input type="checkbox"/> Baptism <i>yy/mm/dd</i>	<input type="checkbox"/> Confirmation <i>yy/mm/dd</i>
Family Role:	<input type="checkbox"/> Head of Household <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other Relative <input type="checkbox"/> Other		

Full Name:	_____		
Personal E-mail:	_____		
Work E-mail:	_____		
Work Phone:	_____	Mobile Phone:	_____
Dates:	Birth <i>yy/mm/dd</i>	<input type="checkbox"/> Baptism <i>yy/mm/dd</i>	<input type="checkbox"/> Confirmation <i>yy/mm/dd</i>
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Full Name:	_____		
Personal E-mail:	_____		
Work E-mail:	_____		
Work Phone:	_____	Mobile Phone:	_____
Dates:	Birth <i>yy/mm/dd</i>	<input type="checkbox"/> Baptism <i>yy/mm/dd</i>	<input type="checkbox"/> Confirmation <i>yy/mm/dd</i>
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Full Name:	_____		
Personal E-mail:	_____		
Work E-mail:	_____		
Work Phone:	_____	Mobile Phone:	_____
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Family Role:	<input type="checkbox"/> Head of Household <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other Relative <input type="checkbox"/> Other		

Thank you for providing this information for our records. It will be kept confidential and used only for Cathedral purposes. Should there be more individuals in your household, please use an additional form.