

**MEMBER**

**REGISTRATION FORM**

**St. George Syro-Malabar Catholic Church**

**408 Getty Avenue, Paterson, NJ 07503**

**Fr. Simmy Thomas (202) 569-3968**

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| **Member Information (USE CAPITAL LETTERS ONLY)** | | | | | | | | | | | | | | | | | |
| **First Name, Middle Initial** | | **Last Name** | **Family Name** | | | | | **M/F** | **Phone (Home)** | | | | | **Phone (Cell)** | | **Email Address** | |
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| **OTHER FAMILY MEMBERS LIVING WITH YOU** | | | | | | | | | | | | | | | | | |
| **Name** | | | **Relation with the head** | | | | | **M/F** | **Phone (Home)** | | | | | **Phone (Cell)** | | **Email Address** | |
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| **HOME ADDRESS** | | | | | | | | | | | | | | | | | |
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| **Street:** | |  | | | | | **Apt. #** | | |  | | | | | | |  |
| **City:** | |  | | | **State:** | |  | | | | | **Zip Code:** | | |  | |  |
| **Please enroll me and my family as registered members of St. George Syro-Malabar Catholic Church, Paterson, New Jersey.** | | | | | | | | | | | | | | | | | |
| **Name:** | |  | | **Date:** | |  | | | | | **Signature:** | |  | | | |  |
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**For office use only: Envelope # ( ) Family unit: ( ) Date: ( )**