**MEMBERSHIP FORM**

**PERSONAL DETAILS:**

**TITLE: NAME: DOB:**

**MARITAL STATUS: DATE OF MARRIAGE:**

**ADDRESS (ONTARIO) ADDRESS (INDIA)**

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**HOME PARISH: DIOCESE:**

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| **SL NO** | **NAME** | **DOB** | **RELATIONSHIP** |
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**CONTACT DETAILS:**

|  |  |  |
| --- | --- | --- |
| **PHONE (RES)** | **PHONE (MOBILE)** | **EMAIL** |
|  |  |  |

I/We hereby declare that all information provided is true and willing to obey all rules and regulations of the church and pay monthly/annual subscription as per the church guidelines.

**DATE:**

**PLACE: SIGNATURE**

**OFFICE USE ONLY**

**VICAR SECRETARY TREASURER**

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| **St. John's Syriac Orthodox Church, Ontario**50 Erie St, North York, ON M6L 2P6Mobile: 289-337-8588Email: joyverghesestjohnschurch@gmail.com | **Church Bank Account Details:** |