NOTRE DAME PARISH

(COMBINED PARISHES OF BELMONT-REDCLIFFE AND CLOVERDALE)

BECOMING A CATHOLIC APPLICATION FORM

PLEASE PRINT & USE BLACK INK

Full Name:	
	Postcode:
Date of Birth:	
Telephone:	Mobile:
Email:	
Baptised: Yes / No (Please circle)	
If 'Yes' Baptised at:	
Father's Name:	
Date of Reception into the Church:	
Time:	

Presbytery and Parish Office: 345 Wright Street, CLOVERDALE WA 6105

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