## CHANGE OF ADRESS

• PLEASE FILLOUT THE FORM IN PRINT & PLACE IT IN SUNDAY COLLECTION BASKET OR DROP IT OFF AT THE PARISH OFFICE

LAST NAME			FIRST NAME		
OLD ADDRESS					
STREET NAME AND NUMBER	APT.	CITY / TOWN	POSTAL CODE	TELEPHONE	EMAIL
PRESENT ADDRESS					
STREET NAME AND NUMBER	APT.	CITY / TOWN	POSTAL CODE	TELEPHONE	EMAIL
*** A	LL FAMII	LY MEMBERS RE	SIDING AT PRESEN	T ADDRESS ***	
LAST NAME, FIRST NAME					
LAST NAME, FIRST NAME					
LAST NAME, FIRST NAME					
LAST NAME, FIRST NAME					
LAST NAME, FIRST NAME					