



St John the Baptist Parish

Catholic Parish of Woy Woy Peninsula –
Diocese of Broken Bay

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NSW 2256 Australia

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ABN 51 683 134 215

Parish Reference for School Enrolment

Dear Parents/Guardians

Please complete all the details on this form and return it to the School, together with the School Enrolment Form. Interviews will be arranged by and held at the School.

School enrolment time provides a good opportunity to renew our assurance of welcome to the parish community. Please complete details on the following pages. Please note that the form will be torn in half and only the section headed **Statement of Faith Background at Time of Enrolment** will be retained by the school as a parish reference.

The Standard Collection Notice is included for your information.

Fr Timothy Raj
Parish Administrator

Standard Collection Notice

1. St John the Baptist Catholic Parish Woy Woy Peninsula collects personal information, including sensitive information about members of the faithful. The primary purpose of collecting this information is to enable it to administer the sacraments and pastoral care to the faithful, and often to children of the faithful. Information may be required to allow the Parish to meet some of its legal obligations, provide care for the child while under supervision and discharge its duty of care. If you reside in the Parish or otherwise continue to use its services, the information may also be used to solicit donations and/or request your services as a volunteer from time to time.
2. The Parish from time to time discloses personal and sensitive information to others for administrative purposes. This includes Parish Schools and other Parishes, the Diocese, medical practitioners and people providing services to the schools including volunteers.
3. If we do not obtain the information requested, we may not be able to administer the sacraments.
4. Personal information collected from children is disclosed to their parents or guardians. Parents or guardians may seek access to personal information collected about them and their son/daughter by contacting the Parish Priest.
5. Adults may also seek access to information collected about them in the same manner.
6. As the Parish is largely reliant upon locally raised funds and local effort for its continuation, information received from those who reside in the Parish or avail themselves of its services may be used to solicit donations and other forms of support from them. On occasions it uses the resources of the Diocese to support this process and in the course of this, information is made available to those people. We will not disclose your personal information to other third parties for other fundraising purposes without your consent.

ST JOHN THE BAPTIST CATHOLIC PARISH WOY WOY PENINSULA CENSUS and PLANNED GIVING APPLICATION FORM

ALL INFORMATION GIVEN WILL BE TREATED AS CONFIDENTIAL

Please use block letters

TITLE:.....SURNAME:.....

WIFE'S MAIDEN NAME:

PHONE NO: (Home) Silent (YES \ NO)

MOBILE NO: (Father) (Mother)

ETHNIC ORIGIN LANGUAGE (other than English)

RESIDENTIAL ADDRESS:

..... Post Code

EMAIL ADDRESS:

POSTAL ADDRESS Post Code

PLANNED GIVING

We would appreciate your participation in the Parish's work for the Kingdom of God

Would you contribute via weekly envelopes?
YES / NO

If yes -your set will be made available for collection from Church.

Would you contribute via monthly credit card donation?
YES / NO

A credit card authorization will be sent to you.

I already have envelopes
Set No: _____

PEOPLE LIVING AT THIS ADDRESS

First Name	Second Name	Position In Family	Marital Status	Sacraments						Date of birth	Occupation or School	Class	Sex M/F	Disability (if any)
				B	E	R	C	M	A					
			P	A	E	C	O	A						

Office Use Only

Entered on PACS	Envelopes Issued	Envelopes No.

Statement of Faith Background for School Enrolment

Name of School: St John the Baptist Primary School Woy Woy

Current School (if applicable) _____

Child's Full Name: _____ Religion: _____

Mother's Name: _____ Religion: _____

Father's Name: _____ Religion: _____

Other Children Attending School

Student's Name: _____ Class: _____ Religion: _____

Student's Name: _____ Class: _____ Religion: _____

Student's Name: _____ Class: _____ Religion: _____

Sacraments Received

	✓/X	Name of Parish	Date
B			
C			
R			
E			

How often would you describe your family's Mass attendance?

Weekly		Where possible		Christmas & Easter	
Fortnightly		Rarely		Never	

How do you describe your family's involvement in your Parish?

If you would like to be more involved in your Parish, please contact the Parish Office.

How do you describe your involvement in your child's current School? *(If applicable)*

Why do you see to enrol your child's in this Catholic School?

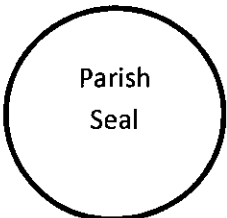
How will you support your child's Faith Education?

OFFICE USE ONLY

I have met with this family and to the best of my knowledge, I can verify the information provided in the above statements.

Further comments

Signature of Parish Priest/Minister



Date