

Mater Ecclesiae Church Change of Address & Information Form
261 Cross Keys Road Berlin, NJ 08009 Phone: 856-753-3408 Fax: 856-753-2671

To Change your address or any other information that is currently on file, please fill out the necessary changes and return to the Rectory Office.

Last Name: _____ (Please Print) First Name: _____ (Please Print) Date: _____

Name Change: _____ (New Name) Reason for Name Change: _____

Previous Address: _____ (Street) _____ (Town) _____ (State) _____ (Zip)

New Address: _____ (Street) _____ (Town) _____ (State) _____ (Zip)

New Telephone No. _____ E-Mail _____

Additions to Family:

New Spouse's Name: _____ Date of Birth _____ Catholic? Yes No

Maiden Name: _____ Date of Marriage: _____ Married by A Priest? Yes No

Please Circle the Sacraments received by your spouse: Baptism First Holy Communion Confirmation

Children: (Please circle the Sacraments received by your child)

Name: _____ Date of Birth _____ Baptism First Communion Confirmation

Name: _____ Date of Birth _____ Baptism First Communion Confirmation

Name: _____ Date of Birth _____ Baptism First Communion Confirmation

Name: _____ Date of Birth _____ Baptism First Communion Confirmation

Type of Change (Check One)

- Address Change
- Add Family Member(s)
- Add to Envelope List
- Delete from Envelope List Only—Still Member(s) of Parish
- Delete Family From Data Base – No Longer Member(s) of Parish

Reason: Moved

Deceased If Deceased, Date: _____

Other

Delete Individual Family Member(s) From Parish List, Family Still Members of Parish

Name of Family Member: _____

Reason: Deceased Divorced Date: _____ Other _____

Name of Family Member: _____

Reason: Deceased Divorced Date: _____ Other _____

FOR OFFICE USE ONLY

DATE REC'D _____ PARISH DATA BASE PROCESSED _____ ENV. LIST _____ ID # _____

HOC _____ CHILDREN OF PARISH UPDATED _____ CCD _____ INITIALS: _____