

ST. VOLODYMYR CATHEDRAL OF TORONTO

400 Bathurst Street • Toronto ON M5T 2S6

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	FOR OFFICE USE ONLY				
	MEMBERSHIP NUMBER:	EFFECTIVE DATE:			
			YYYY		
_					

SVCT MA EN 12-MAY-2021

APPLICATION FOR MEMBERSHIP

MEMBERSHIP TYPE (fees due annually): ☐ Individual \$150 ☐ Family \$300							
PERSONAL INFORMATION							
Last Name (EN):		First Name (EN):					
Last Name (UA):		First Name (UA):					
Date / Place of Birth: [EX. 26 NOV 1979] Date / Place of Baptism: D D D M M M Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
						SPOUSE'S INFORMATION (for F	OUSE'S INFORMATION (for Family Memberships):
Last Name (EN):	ast Name (EN):		_ First Name (EN):				
Last Name (UA):	ast Name (UA):		First Name (UA):				
Date / Place of Birth:							
Date / Place of Baptism:							
[EX. 14 JAN 1986] Date / Place of Marriage:	ge: _ D , D , M , M , M , Y , Y , Y , Y , /						
CHILDREN (UNDER 18) NAMES	DATE OF BIRTH [EX. 25 DEC 2010]	CHILDREN (UNDER 18) NAMES	DATE OF BIRTH [EX. 25 DEC 2010]				
	D D M M M Y Y Y Y		D D M M M M Y Y Y Y Y				
	zed into Orthodoxy?		_ D , D , M , M , M , Y , Y , Y , Y ,				
Apt.#: Apt.#:							
	il address(es):						
Telephone: Cell: C							
						I, the undersigned, do hereby apply for membership in the parish of St. Volodymyr Cathedral. I further promise, faithfully and conscientiously, to fulfill all obligations as a member of this parish, and to subscribe to the teachings, statutes and resolutions of the Ukrainian Orthodox Church of Canada, as well as the statutes and resolutions of St. Volodymyr Cathedral.	
D D M M M Y Y Y Y Signature(s) Date [EX. 14 JAN 2017]							
PLEASE SUBMITTHIS APPLICATION WITH MEMBERSHIP DUES PAYABLE TO: ST. VOLODYMYR CATHEDRAL							
	FOR OFFICE USE ONLY						
INTERVIEWED BY: PRIEST:							
DATE: D D M M M	Y Y Y Y	CHURCH COUNCIL:					