

REQUEST FOR REFERENCE FORM

Name : _____
Address : _____

Phone: _____
eMail: _____

Purpose of the reference: _____

To whom will this reference be addressed: _____

Date of Birth : _____ Status : ___/Single ___/Married
Date of Baptism : _____ ___/Widow or Widower
Place of Baptism : _____ Age : _____

1. Do you attend mass regularly at one of the churches served by Saint Mary's Parish-Walgett?

___/Yes.

___ : Walgett ___ : Lightning Ridge ___ : Angledool
___ : Carinda ___ : Cumborah ___ : Goodooga

___/No___/Seldom

2. Do you attend mass regularly at another church?

___/Yes, at: _____ ___/No___/Seldom

3. Are you involved in the life of Saint Mary's Parish-Walgett?

___/Yes. In what way? _____

___/No___/Seldom

4. Are you registered in the Planned-Giving Program of Saint Mary's Parish-Walgett?

___/Yes ___/No

5. Are you known to the Priest of Saint Mary's Parish-Walgett?

___/Yes. ___/No

Your comment: _____

