



Application for Membership

Please fill out this form and return to the address listed
Please print clearly

Saint Charbel

Saint Charbel, Pray for Us!

THE ORDER OF SAINT CHARBEL

P.O. Box 815
Nowra, N.S.W. 2540
Australia
Tel/Fax: +61 2 44460263
Tel/Fax: +61 2 44460832
Email: mwoa@shoal.net.au

Website: www.shoal.net.au/~mwoa/index.html

Applying for which Branch? (First, Second, Third, Fourth)

Date of Application? and Place of Application?

Which Community do you want to affiliate with?

Date of first Promise? and Place of Promise?

PERSONAL INFORMATION

Family Name (Surname):
First Name (Christian Name):
Address:
City/State/Postcode:
Country:

CONTACT INFORMATION

Tel 1:
Tel 2:
Fax:
Mobile:
Email:

MARITAL STATUS (Married/Single/Separated/Other)

Marital Status:
If Married, Spouse's Name:
Were you married in the Catholic Church?
Are you a Convert to the Catholic Church?

SACRAMENTS RECEIVED

Baptism:
First Communion:
Confirmation:
Holy Orders:

Children living with you (persons over 18 must join separately)

Child Name: Date of Birth:
Child Name: Date of Birth:
Child Name: Date of Birth:
Child Name: Date of Birth:

For more Children, please fill out on reverse of this sheet

OCCUPATION(S)

Your Occupation:
Your Spouse's Occupation:

Talents/Special skills

Talents:
Talents:

GENERAL HEALTH (Fill out extra sheets as necessary)

Do you have any illness?
Do you have any disability?
Does your Spouse have any illness?
Does your Spouse have any disability?
Do your children have any illness?
Do your children have any disability?

Your Doctor

Child's Name:
Child's Name:

RELIGIOUS LIFE (previous religious vocation or transfer from another Religious Congregation)

Name of Congregation:
Address:
How long a member:
Name of your Religious Superior:
Reasons for leaving:

Vows/Promises taken:

Date of departure:
May we contact this Superior?

GENERAL INFORMATION (please use additional sheets if necessary)

How did you hear about the Order?
Reasons for desiring to join:
Prefer affiliation with a specific Community in your region?
Is your Spouse in agreement with your joining the Order?
Are you financially self-sufficient?
Do you have any outstanding debts (please explain)?

ADDITIONAL REMARKS (anything you wish to add):

SIGNATURE AND DATE

Applicant:

Spouse (if applicable):