



63A Chartwell Drive, Singapore 558758, Tel 6280 6076

SERVICE TEAM

| | | | | |
|---|-----------------|--------------|---------|-------------|
| Name in NRIC: <i>Underline Surname</i> | | | | Male/Female |
| Date of birth: | | Current Age: | | |
| Address: | | | | |
| Contact No.: | Home: | | Mobile: | |
| Education Level: | | Profession: | | |
| Baptism <i>*Provide full address if outside Singapore</i> | Name of Church: | | | |
| | Date: | | | |
| Confirmation <i>*Provide full address if outside Singapore</i> | Name of Church: | | | |
| | Date: | | | |

MARITAL STATUS (Please check (✓) the appropriate box)

| | | | |
|---------------------------------|----------------------------------|--|----------------------------------|
| <input type="checkbox"/> Single | <input type="checkbox"/> Married | <input type="checkbox"/> Divorced <i>Civil/ Annulled?</i> | <input type="checkbox"/> Widowed |
|---------------------------------|----------------------------------|--|----------------------------------|

COMMITMENT TO YEAR LONG JOURNEY

I commit to be consistently present & punctual at the following throughout this journey

| | YES |
|--|--------------------------|
| Weekly sessions (to reach by 7.20pm) | <input type="checkbox"/> |
| Weekend Mass | <input type="checkbox"/> |
| Additional activities during the course of this journey | <input type="checkbox"/> |
| Additional activities required of the ministry at parish level | <input type="checkbox"/> |

Do attach a recent photograph

IMPORTANT PDPA NOTICE:

The Church of St Francis Xavier ("the Church") safeguards all personal data collected through any ministry, parish, commission, or activity, in accordance with the Singapore Personal Data Protection Act 2012 ("PDPA").

In compliance with the PDPA and by signing this form, I agree and consent to the collection, receipt, processing, disclosure, storage and use of all my personal data and all such data submitted to the Church for the purpose of processing and administration of the abovementioned.

I certify the above information is true to the best of my knowledge and acknowledge and agree to abide with the guidelines and PDPA notice.

Name and Signature

Date

FOR ADMINISTRATOR USE ONLY

| | |
|-------------|----------------|
| RCIA Batch: | Other Remarks: |
|-------------|----------------|