Plea	ATTACH PHOTOS HERE Coptic Orthodox Church Diocese of Sydney and Affiliated Regions <u>Papal Visit 2017</u> <u>Church Membership Form (to be filled in by people 15 years and over)</u> Please fill in the information below in English and as shown on the Driver license or Passport.															
	Church:															
	Title: Mr Mrs Miss Master Gender:											Μ	F			
	First Nan	ne:														
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	Country	-														
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		l Language														
	Confessio (Option															
	Denomination Coptic Orthodox Other (Specify)															
	Disability (optional) Yes No															
	Date of B	Day	Month	/	Year	r										
	Address	Street Suburb State				Po	ostcoe	de								
Home Tel No: (0) Mobile Tel: 04																
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	Spouse															
	Child 1															
	Child 2															
	Child 3															
	Child 4															
	Child 5															



We would like to attend the following functions:

Sydney – Youth meeting – Friday eveningSydney - Holy Liturgy – Saturday morningSydney – General Reception – Saturday evening

Date, time and location of these events will be announced at a later date.

Privacy and Personal Information - Collection, Use and Disclosure of Personal Information

The Coptic Orthodox Church, Diocese of Sydney & Affiliated Regions needs to collect, use and disclose personal information generally for pastoral and administrative purposes. Not providing us with this personal information may affect our ability to serve our Coptic congregation.

By providing your personal information to us you acknowledge and consent to:

- The collection and use of your personal information for the Sydney Diocese's database for the Coptic Orthodox.
- ✤ The disclosure of your personal information on a confidential basis to the Coptic Patriarchate of Egypt, Bishop of the Coptic Sydney Diocese, priests, church committees, bodies and persons deemed concerned with the issue by the Bishop of the Coptic Sydney Diocese and representatives of these; and
- ★ Where you provide personal information to us about another person, you are authorised to provide that information to us, and you will inform that person who we are, how we use and disclose their information, and that they can gain access to that information (unless doing so would pose a serious threat to the life or health of any individual).

DECLARATION

I acknowledge and consent to the collection, use and disclosure of my personal information as per the Privacy and Personal Information section above.

We declare that we have read and agree to the confidentiality clauses shown above. Signature: -----/ 2017 Spouse Signature:----/ 2017 <u>Priest Confirmation</u> Name: -----Signature: -----/ 2017