



St. Silouan the Athonite Orthodox Church

A Mission Parish of the American Carpatho-Russian

Orthodox Diocese of North America

Ecumenical Patriarchate of Constantinople

237 Sackville Street Toronto, Ontario M5A 3G1

email: info@stsilouan.ca

MEMBERSHIP FORM

(Please print clearly and fill out the entire form where possible)

First Name _____ Last Name: _____

Address _____ City _____

Postal code _____

Home phone _____ - _____ - _____ Cell phone _____ - _____ - _____

Email _____

Name Day (d/m) _____ Birthday (d/m/y) ____ / ____ / ____

FOR FAMILIES

Full Name	Name Day (d/m)	Birthday (d/m/y)	Signature
<input type="checkbox"/> _____	_____	_____	_____
<input type="checkbox"/> _____	_____	_____	_____
<input type="checkbox"/> _____	_____	_____	_____
<input type="checkbox"/> _____	_____	_____	_____
<input type="checkbox"/> _____	_____	_____	_____
<input type="checkbox"/> _____	_____	_____	_____

I would prefer that any photos of myself / family members not be used in parish publications/websites.

Voting Membership of the Corporation of the Parish: Voting Members of the Corporation of the Parish obtain the benefits of voice and vote as well as holding office on the Corporation Board of Directors of the Parish. Applicants eligible and willing to make the commitments must check the box by their name to obtain Parish Priest approval.

Applicant Signature: _____

Date (d/m) _____

Fr. Paul Tadros: _____

Date (d/m) _____

St. Silouan the Athonite Orthodox Church, Toronto www.stsilouan.ca

STEWARDSHIP PLEDGE

(Please print clearly and fill out the entire form where applicable)

I (We) pledge (check applicable):

___ To contribute to St. Silouan Parish of \$___ / mo.

___ Cash / cheque in the donation box at the church. Please make cheques payable to "St. Silouan Church."
(Please ensure that it is placed in an envelope with the date, your name and address.)

___ Online payment options (PayPal, e-mail money transfer or other)
(For exact details please select "Support Us" on the Parish website www.stsilouan.ca.)

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Please identify (√) any Ministry you would like to join, select multiple if you are able.
If you would like to take a leadership role in one of these Ministries, write a letter "L."

<input type="checkbox"/>	Agape	<input type="checkbox"/>	Choir
<input type="checkbox"/>	Special Events	<input type="checkbox"/>	Missions and Evangelism
<input type="checkbox"/>	Liturgical Formation	<input type="checkbox"/>	Outreach
<input type="checkbox"/>	Youth/Young Adults Group	<input type="checkbox"/>	Parish Beautification
<input type="checkbox"/>	Fundraising and Growth	<input type="checkbox"/>	Website and Communications
<input type="checkbox"/>	Phos	<input type="checkbox"/>	Adult Education

Other suggestions: _____

Other skills or areas of expertise that you think may be useful for our church: _____

I will fulfill my pledge to the best of my abilities: *I understand that my pledge information will be held in strict confidence. In the event that unforeseen circumstances makes it impossible for me to fulfill my obligation, I will contact the Parish Treasurer or Parish Bookkeeper (donations@stsilouan.ca).*
(Please print clearly.)

Name _____

Address _____

Phone _____ Email _____

Signature _____ Date (d/m/y____ / ____ /)

* Please submit all pages to the Parish Council via a) collection box, or b) email to donations@stsilouan.ca,