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| --- | --- |
| **Name and Surname** | **House name:** |
| **Date of Birth:** | **Place of Birth:** |
| **Diocese in India:** | **Parish in India:** |
| **Gender:** | **Occupation: Education:** |
| **Mobile:** | **E-mail:** |
| **Residential address in Australia** | **Address in India** |
| **Date of marriage if confirmed** |  |
| **Father:** | **Parish Priest** |
| **Mother:** | **Parish of Wedding** |
| **Name and Address of the Syro Malabar Community(parish) In Australia you belong to:****Name of the Parish Priest** | **Native Parish Address:** |
| **Proposed Spouse** | **His/her parish** |

**CONSENT TO OBTAIN PERSONAL INFORMATION**

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| **IMPORTANT INFORMATION FOR PARTICIPANTS****VENUE: POLISH CENTRE 211 GOYDER ST, NARRABUNDAH, 2604, ACT, DATES: 29,30,31(MON, TUE, and WED JULY 2019 TIME: STARTS AT 9.30AM, MONDAY AND ENDS AT 3.30 PM, Wednesday, Late comers are not welcomed. Please transfer Reg: fees $300.00 to the following account Name: The Syro Malabar Eparchy of Family Apostolate BSB: 083347; Account number: 232 865 310 (It includes two nights’ accommodation, Monday and Tuesday, Course fee and food for three days except Monday breakfast ) So those Who would like to participate may register their names  before July 15th .****Important information: All those who register for the marriage preparation course, cancels their registration due to any reason, the deposited money wouldn’t be refunded if it is after 30th June. It is due to the practical difficulties in organizing the course.****(Please remember Registration will be considered only through online payment)****OR write the cheque towards The Syro Malabar Eparchy of Family Apostolate and send it with the completed form to Fr George Mankuzhikary, 36 Harbour Street, Wollongong, NSW 2500 OR email to** **gmankuzhikkary@gmail.com****Mobile : 0438411417** |

**I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_hereby acknowledge that any information provided by me on this Form, may be taken into account and will be used by the Syro-Malabar Australia for the purpose of the anticipated marriage.**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_ /\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_**