

Change of Address Form

Name:		
This change of address is:	Temporary Permanent	
If Temporary, dates new addre	ss is effective:	
from:	to:	
If Permanent, date new address	s is effective:	
Please remove me from the Pa	rish Register:	Yes No
New Contact Information		
Address:		
City:	Province:	
Postal Code:		
Telephone:	Email:	
Comments		

[&]quot;the tree planted in 1732 still grows"