



Lord Strathcona's Horse (Royal Canadians)

Family Support Troop

Family Information Form

Note: This form is to be completed by all CF personnel (Reg/Res) and Civilian employees on strength at the Regiment, and their spouse (if applicable). It is the responsibility of the member and his/her spouse to update their info and notify FST of any changes.

Particulars of CF / Civilian Member				
Service Number	Rank	Surname	Given Name	Middle Initial
Current Home Address			City and Province	Postal Code
Mailing Address (If different than above)			City and Province	Postal Code
Home Phone Number ()	Cell Phone Number ()		Work Phone Number () , ext.	
E-Mail				
COS (dd/mm/yy)			Date of Birth (dd/mm/yy)	
Marital Status (Check One)			Members Status (Check One)	
Single			Reg Force Member	
Common-Law			Res Force Member	
Married			Civilian Member	
Particulars of Spouse (If applicable)				
Surname		Given Name		Date of Birth (dd/mm/yy)
Mailing Address (If different than above)		City and Province		Postal Code
Home Phone Number ()	Cell Phone Number ()		Work Phone Number () , ext.	
E-Mail				
Particulars of Children/Dependants (If applicable)				
Surname	Given Name	Middle Initial	Date of Birth (dd/mm/yy)	Gender
Surname	Given Name	Middle Initial	Date of Birth (dd/mm/yy)	Gender
Surname	Given Name	Middle Initial	Date of Birth (dd/mm/yy)	Gender
Surname	Given Name	Middle Initial	Date of Birth (dd/mm/yy)	Gender
Surname	Given Name	Middle Initial	Date of Birth (dd/mm/yy)	Gender
Surname	Given Name	Middle Initial	Date of Birth (dd/mm/yy)	Gender
Preferred Method of Contact (Please circle one)				
Home Phone		Cell Phone		Email

Member's Signature	Spouse's Signature (If applicable)	on _____ Date Submitted to FST (dd/mm/yy)
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