

Saint Catherine Labouré Parish Registration Form

Welcome! Please **PRINT** all information as completely as possible listing all family members currently residing in your household. Please return form to Saint Catherine Labouré Parish at 320 McMurray Road, Pittsburgh, PA 15241. Please call 412-833-1010 with any questions. Thank you!

Family Last Name: _____

Address: _____

City, State Zip: _____

Home Telephone Number: _____ **Unl** ☐ **Cell:** _____
(Please list home telephone number even if unlisted)

Email(s): _____

Parish you are transferring from* (if applicable): _____

**Please notify your current parish that you are leaving, thank you!*

Married Couples -Wedding Date: _____ Married by a Catholic Priest: Yes _____ No _____

Church

City, State

Head of Household Adult Male: _____

Last Name

First

Middle

Date of Birth: _____ Religion: _____

Marital Status: Married _____ Single _____ Separated _____ Divorced _____ Widowed _____

Sacraments Received: Baptism _____ First Communion _____ Confirmation _____ Marriage _____

(If Non-Catholic Baptism please indicate faith) _____

Highest Grade Level Achieved: _____ Physical Limitations : _____
(if applicable)

Occupation: _____ Employer : _____

Head of Household Adult Female: _____

Last Name and Maiden (if applicable)

First

Middle

Date of Birth: _____ Religion: _____

Marital Status: Married _____ Single _____ Separated _____ Divorced _____ Widowed _____

Sacraments Received: Baptism: _____ First Communion _____ Confirmation _____ Marriage _____

(If Non-Catholic Baptism please indicate faith) _____

Highest Grade Level Achieved: _____ Physical Limitations _____
(if applicable)

Occupation: _____ Employer : _____

Children or Other Household Members (*currently living in home*)

Our school-aged children will be/are registered in: Saint Catherine Labouré Religious Education ____
Saint Louise School ____

Member Name: _____
Last Name First Middle

Relationship: Son ____ Daughter ____ Other _____

Date of Birth: _____ Religion: _____

Sacraments: Baptism _____ First Communion _____ Confirmation _____

Employer/School Attending: _____

Current Grade: _____ Physical Limitations : _____
(if applicable)

Additional Child

Member Name: _____
Last Name First Middle

Relationship: Son ____ Daughter ____ Other _____

Date of Birth: _____ Religion: _____

Sacraments: Baptism _____ First Communion _____ Confirmation _____

Employer/School Attending: _____

Current Grade: _____ Physical Limitations : _____
(if applicable)

Additional Child

Member Name: _____
Last Name First Middle

Relationship: Son ____ Daughter ____ Other _____

Date of Birth: _____ Religion: _____

Sacraments: Baptism _____ First Communion _____ Confirmation _____

Employer/School Attending: _____

Current Grade: _____ Physical Limitations : _____
(if applicable)

Additional Child

Member Name: _____
Last Name First Middle

Relationship: Son ____ Daughter ____ Other _____

Date of Birth: _____ Religion: _____

Sacraments: Baptism ____ First Communion ____ Confirmation ____

Employer/School Attending: _____

Current Grade: _____ Physical Limitations : _____
(if applicable)

Additional Child

Member Name: _____
Last Name First Middle

Relationship: Son ____ Daughter ____ Other _____

Date of Birth: _____ Religion: _____

Sacraments: Baptism ____ First Communion ____ Confirmation ____

Employer/School Attending: _____

Current Grade: _____ Physical Limitations : _____
(if applicable)

(If additional members, please copy this form or request additional form for completion)

Do you or a family member have any particular needs to assist which would allow you to participate more fully at Mass and in our parish life (such as allergies, auditory, developmental, mobility, visual or other special circumstances)?

Our parish operates on a weekly envelope system. If you prefer a paperless gift program, please indicate so here _____ and we will email information on our **online giving** option.

Thank you for beginning the registration process at Saint Catherine Labouré Parish!

Talent & Interest Survey

Family Last Name: _____ Email Address: _____	Names of Interested Family Member(s)
<i>Prayer and Service Opportunities</i>	
Altar Servers	
Appalachian Work Camp	
Bible Study	
Catholic Fellowship - Men's and Women's Groups	
Dignity Robes - Make garments for women undergoing chemotherapy	
Divine Mercy Ministry	
Eucharistic Adoration— Wednesday (STL) & Thursday (SJA)	
Eucharistic Ministers—At Mass and to Homebound Parishioners	
Evangelization	
Faith Formation (Religious Education)	
Ladies of Charity—Food Pantry, General support for needy	
Lectors/Commentators	
Music Ministry– Choir, Children's Choir, Handbells, Instrumentalists	
Nocturnal Adoration, First Friday of each Month	
Prayer Shawl Ministry– Knit or Crochet for the Ill	
Retreat Planning– Men and Women	
Respect Life	
Saint Vincent de Paul Society	
SHIM Garden Volunteer ____ SJA or ____ STL	
Ushers	
Wedding Coordination	
Youth Ministry Group - Middle School (Grades 6-8)	
Youth Ministry Group - High School (Grade 9-12)	
<i>Service and Fun</i>	
Book Club	
Labouré Ladies Guild	
Ladies' Bowling	
Men's Golf	
Men's Basketball	
Men's Fish Fry Club	