

PARISH REGISTRATION

| Date: | -1 | |
|--|-------------------------|-------------|
| ADULT - Circle One: Mr. Mrs. Ms. Miss Dr. | | |
| LAST NAME: | FIRST NAME: | |
| PREFERRED FIRST NAME: | SEX: M F | |
| STREET ADDRESS: | _ CITY: | STATEZIP: |
| PHONE: HOME: CELL: | | WORK: |
| PREFERRED EMAIL: | | <u>-</u> |
| CATHOLIC: Y OR N OTHER: | W | BIRTHDAY:// |
| BAPTISM: Y OR N NAME / LOCATION OF PARISH: | | |
| 1 ST COMMUNION: Y OR NO CONFIRMATION: Y OR | R NO | |
| MARITAL STATUS: Married Single Divorced Widov | wed | |
| MARRIED BY A PRIEST/DEACON: Y OR N DATE OF MA | ARRIAGE:/_ | _/ |
| EMPLOYER: | OCCUPATION: | |
| MINISTRIES/TALENTS: | | |
| | | |
| ADULT - Circle One: Mr. Mrs. Ms. Miss Dr. | | |
| LAST NAME: | FIRST NAME: | |
| PREFERRED FIRST NAME: | | |
| STREET ADDRESS: | _ CITY: | STATEZIP: |
| PHONE: HOME: CELL: | | |
| PREFERRED EMAIL: | | _ |
| | | |
| CATHOLIC: Y OR N OTHER: | | BIRTHDAY:// |
| CATHOLIC: Y OR N OTHER:BAPTISM: Y OR N NAME / LOCATION OF PARISH: | | |
| | | |
| BAPTISM: Y OR N NAME / LOCATION OF PARISH: | NO | |
| BAPTISM: Y OR N NAME / LOCATION OF PARISH: | NO wed | |
| BAPTISM: Y OR N NAME / LOCATION OF PARISH: 1 ST COMMUNION: Y OR NO CONFIRMATION: Y OR MARITAL STATUS: Married Single Divorced Widow | NO wed ARRIAGE:/_ | |

| <u>CHILD</u> (or other household member – | please note relationship | o) | | | | |
|---|--|---------|---------|--------------|--|--|
| LAST NAME: | FIRST NAME: | | | NICK NAME: | | |
| CATHOLIC: Y OR N OTHER: | BIRTHDAY: | _/_ | / | SEX: M F | | |
| SCHOOL: | HOOL: YEAR WILL GRADUATE FROM HIGH SCHOOL: | | | | | |
| BAPTISM: Y OR N NAME/LOCATION | OF PARISH: | | | | | |
| 1 ST COMMUNION: Y OR N//_ | NAME/LOCATION | of Pai | RISH: _ | | | |
| CONFIRMATION: Y OR N// | NAME/LOCATION OF | PARIS | Н: | | | |
| <u>CHILD</u> (or other household member – | please note relationship |) | | | | |
| LAST NAME: | FIRST NAME: | | | NICK NAME: | | |
| CATHOLIC: Y OR N OTHER: | BIRTHDAY: | _/_ | / | SEX: M F | | |
| SCHOOL: | YEAR WILL GRA | DUAT | E FROM | HIGH SCHOOL: | | |
| BAPTISM: Y OR N NAME/LOCATION | OF PARISH: | | | | | |
| 1 ST COMMUNION: Y OR N//_ | NAME/LOCATION | OF PAI | RISH: _ | | | |
| CONFIRMATION: Y OR N// | NAME/LOCATION OF | PARIS | Н: | | | |
| | | | | | | |
| <u>CHILD</u> (or other household member – | please note relationship |) | | , *** | | |
| LAST NAME: | FIRST NAME: | | | NICK NAME: | | |
| CATHOLIC: Y OR N OTHER: | BIRTHDAY: | /_ | _/ | SEX: M F | | |
| SCHOOL: | YEAR WILL GRA | DUAT | E FROM | HIGH SCHOOL: | | |
| BAPTISM: Y OR N NAME/LOCATION | OF PARISH: | | | | | |
| 1 ST COMMUNION: Y OR N//_ | NAME/LOCATION | OF PAI | RISH: _ | | | |
| CONFIRMATION: Y OR N// | NAME/LOCATION OF | PARIS | н: | | | |
| | | | | | | |
| Name of any homebound or other spe | ecial needs to bring to ou | ır atte | ntion:_ | | | |
| Family members not living at home w | | | | | | |
| How did you find out about us? | | | | | | |
| What can we do for you? | | | | | | |

ST. ROBERT BELLARMINE CATHOLIC CHURCH

Parish Involvement

| Your Family Name: | | |
|--------------------|---------|--|
| Phone Number: Home | or Cell | |
| Email: | | |

| Activity | More | Already |
|---|-------------|----------|
| • | Information | Involved |
| Annual Parish Events/Socials/Fundraisers | | |
| Assist at Mass (Scheduled Monthly) | | |
| a) Eucharistic Minister (Distribute Communion) | | |
| b) Greeters/Ushers | | |
| c) Lectors (Readers) | | |
| Come to Me (Children's Liturgy Leaders during Mass) | | |
| Confirmation (Assist with Programs) | | |
| Finance Committee *requires financial background | | |
| Funeral Dinners (Assist, prepare, serve) | | |
| Grounds Crew (Mowing, Snow Removal) | | |
| Hand Up-Social Service Ministry | | |
| Health and Wellness Committee | | |
| Homebound Ministry (distribute Holy Communion) | | |
| Hospitality | | |
| Knights of Columbus (become a member) | | |
| Men's Ministry (become a member) | | |
| Music Ministry (Sing, play an instrument) | | |
| Parish Council (Bi-monthly meetings) | | |
| Parish School of Religion Programs and Volunteers | | |
| Prayer Chain (Calls and emails to pray for those on list) | | |
| Right to Life Ministry | | |
| RCIA (Rite of Christian Initiation of Adults) | | |
| a) Sponsor those investigating the Catholic faith | | |
| b) Team Member (Leaders/Instructors) | | |
| That Man is You | | |
| Welcome Ministry (become a member) | | |
| Women's Ministry (become a member) | | |
| Young Mother's Group | | |
| Youth Minister Volunteer (assist with programs) | | |
| Other: Please List | | |

Please list any other suggestions or ideas to help more parishioners become involved: