



ST. CLARE OF ASSISI

Love God, serve God: everything is in that.

Parish Registration

Please complete and either print and return by mail, in the offertory, or to the parish office at 864 Chicora Rd., Chicora, Pennsylvania 16025. If you wish to return via email, save form after completion and forward to nicole@saintclareparish.com.

Date Completed: _____

Family Name: _____ **Contact Phone:** _____

Street, City, State, Zip _____

Mailing Address (if different): _____ **Zip Code:** _____

Email Address: _____

Please use one line for each family member living at the address above (including non-Catholic members.) Please fill out as much information as you can. Individuals age 18 and older are considered an adult member and should complete a separate form. Please list children where stated.

First Name, Middle Initial _____	Gender: M F
<i>(list last name if different from family last name above)</i>	
Date of Birth: _____	Maiden Name: _____
Cell Phone: _____	
Marital Status: Single Married Widow(er) Separated Divorced	
Religion: _____	
Occupation: _____	Employer: _____
Sacraments (if known): Baptism Date & Church _____	
First Communion [†] IP [†] _____	Confirmation [†] IP [†] _____
Date & Place of Marriage: _____	

First Name, Middle Initial _____	Gender: M F
<i>(list last name if different from family last name above)</i>	
Date of Birth: _____	Maiden Name: _____
Cell Phone: _____	
Marital Status: Single Married Widow(er) Separated Divorced	
Religion: _____	
Occupation: _____	Employer: _____
Sacraments (if known): Baptism Date & Church _____	
First Communion (Y/N): _____	Confirmation (Y/N): _____
Date & Place of Marriage: _____	

List Children Below

First Name, Middle Initial _____ <i>(list last name if different from family last name above)</i>		Gender: M F
Date of Birth: _____	School: _____	Grade: _____
Religion: _____		
Sacraments (Yes/No):	Baptism: _____	First Communion: _____ Confirmation: _____

First Name, Middle Initial _____ <i>(list last name if different from family last name above)</i>		Gender: M F
Date of Birth: _____	School: _____	Grade: _____
Religion: _____		
Sacraments (Yes/No):	Baptism: _____	First Communion: _____ Confirmation: _____

First Name, Middle Initial _____ <i>(list last name if different from family last name above)</i>		Gender: M F
Date of Birth: _____	School: _____	Grade: _____
Religion: _____		
Sacraments (Yes/No):	Baptism: _____	First Communion: _____ Confirmation: _____

First Name, Middle Initial _____ <i>(list last name if different from family last name above)</i>		Gender: M F
Date of Birth: _____	School: _____	Grade: _____
Religion: _____		
Sacraments (Yes/No):	Baptism: _____	First Communion: _____ Confirmation: _____

First Name, Middle Initial _____ <i>(list last name if different from family last name above)</i>		Gender: M F
Date of Birth: _____	School: _____	Grade: _____
Religion: _____		
Sacraments (Yes/No):	Baptism: _____	First Communion: _____ Confirmation: _____

Parish Ministries: Please check the ministries that interest you and someone will contact you.

Extraordinary Minister of the Eucharist

Usher

Evangelism Program

Lector

CCD Teacher/Volunteer

Youth Group

Altar Server

Community Dinner/Service

St. Wendelin School

Choir/Cantor

Decorating of Church

Pre-K, K through 8