

Saint Gabriel Registration Form

(PLEASE PRINT)



Family Name

Spouse Maiden name

Date of Marriage

Place of Marriage(Parish/City/State)

Name to address to

Main address

City

State ZIP Code

Phone (Home)

Cell Phone (H=husband's, W= wife's)

Email

Previous Parish (Name/City/State)

Date

Envelope #

Secondary address:

City

State Zip

Phone

Months/dates at this address:

Send mail to this address? Yes or No

Check if you would like to receive correspondence via e-mail

- (m)arried **(optional)**
- (s)ingle 1-White-non Hispanic
- (w)idowed 2-Hispanic
- (d)ivorced 3-African American
- 4-Oher

Adults in Household

Name		Nickname	Date of Birth	Religion	Marital Status	Gender	Ethnicity (1-4)	Check (X) sacraments completed			Occupation	Grade/Degree
First	Last							Baptism	1st Comm	Confirm		

Note: List last name if different than family name.

Children

Name		Nickname	Date of Birth	Religion	Attend CCD(Y/N)	Gender	Ethnicity (1-4)	Check (X) sacraments completed			School	Grade
First	Last							Baptism	1st Comm	Confirm		

Saint Gabriel Registration Form Additional Information

Please Complete Additional Information on Other Side

Special Pastoral Needs

Homebound [] Handicapped/Disabled [] Special Education Needs []

Would you like communion brought to homebound person? _____ Would you like a phone call from Fr. Tim? _____

Please list any talents, skills or hobbies you have that might benefit the parish (please list the name of the family member next to it)

Optional: Business Owner and Type of Service

Business Name: _____

Type of Service: _____

Contact Person: _____ Phone Number: _____

Areas to Consider Becoming Involved In

Worship:

- ___ Usher
- ___ Lector
- ___ Greeter
- ___ Eucharistic Minister
- ___ Server
- ___ Sacristan
- ___ Choir or Cantor
- ___ Musician
- ___ Art/Environment
- ___ Resurrection Ministry/Funerals

Christian Formation

- ___ Commission Member
- ___ School Commission
- ___ Rel. Ed. Teacher
- ___ Aide to Rel. Ed. teacher
- ___ Bible Study leader
- ___ Adult Ed Programs
- ___ Evangelization
- ___ Welcome new members
- ___ Vocations

- ___ **Christian Women**
- ___ Member
- ___ Help with Funeral Meals

Administration

- ___ Finance Commission
- ___ Stewardship Commission
- ___ Communications Committee
- ___ Mailings/Office Help

Parish Activities:

- ___ Flea Market
- ___ Auction
- ___ Other Fundraising
- ___ Other parish functions
- ___ Bake for events
- ___ Seniors Group

Building & Grounds

- ___ Committee Member
- ___ Maintenance work
- ___ Other _____
- ___ Special Skills _____

Human Concerns

- ___ Commission Member
- ___ St. Ben's Meal Program--help serve
- ___ Help at the Food Pantry
- ___ St. Vincent de Paul
- ___ Blood Pressure
- ___ Homebound/hospital visits
- ___ Reminisce visits