



**Continued on Reverse**

Required Information continued:

	<b>Husband</b>	<b>Wife</b>	<b>Other</b> (Single, Separated or Divorced Adult)
Occupation:			
Employer:			
Special Qualifications:			
Special Interests:			

Please indicate if you would like more information about: (place a check in the appropriate box)

<b>Interests and skills</b>	<b>Husband</b>	<b>Wife</b>	<b>Others / Children</b>
Sacrament(s) please indicate which sacrament(s)			
Religious Education			
Extraordinary Minister of Holy Communion			
Lector			
Altar Server			
Choir			
Social Action			
Knights of Columbus			
Youth or Young Adult Group			
Maintenance or Office Work			
Finance			
Outreach			
Other			

Comments or Additional Space:

**Thank you for registering with St. Gabriel Parish!**

**Please e-mail registration form as an attachment to the Parish Office at [karladipnarine@yahoo.com](mailto:karladipnarine@yahoo.com)**