

Family Information				
Family Last Name	_____			
Home Address	_____	_____	_____	_____
	Street	Apt	City	State Zip
Home Phone	_____		Cell Phone	_____
Home Email	_____			

Family Members			
	First Name	Last Name if Different	Date of Birth
Head of Household			
Spouse			
Child/Adult			
Child/Adult			
Child/Adult			
Child/Adult			

Yes I would you like a complimentary subscription to the Catholic Sun.

What Parish did you come from? _____
Name of Parish
City
State

If you are interested in getting involved, a list of ministries may be found at saintstevensparish.org and in the bulletin.

Ways to donate to guarantee your contributions are recorded into your account:

Yes I would like envelopes because I donate cash.

I donate by check — then there is no need for an envelope

To donate online go to ststevensaz.weshareonline.org and make sure you enter your envelope ID #.

Return form to Karen at karen@ststevensaz.org

For Office Use Only	
Date Received _____	<input type="checkbox"/> Approved <input type="checkbox"/> Declined
Confirmed with Ministry _____	Date Entered in PDS _____