

Immaculate Conception **Parishioner Registration**

Name _____

Last
First
M.I.
Maiden (if applicable)

Date of Birth _____ Email _____

Phone _____ Can we text you? yes no

Mailing Address _____

Physical Address _____
(if different from mailing address)

Occupation _____

please mark all sacraments already received:
 Baptism First Communion
 First Reconciliation Confirmation

Spouse Information (if applicable)

Name _____

Last
First
M.I.
Maiden (if applicable)

Date of Birth _____ Email _____

Phone _____ Can we text them? yes no

Occupation _____

please mark all sacraments already received:
 Baptism First Communion
 First Reconciliation Confirmation

Child Information (if applicable, only those under 18)

Name	Date of Birth	Gender	<i>please mark all sacraments already received:</i>	
_____	_____	M F	<input type="checkbox"/> Baptism	<input type="checkbox"/> First Communion
_____	_____	M F	<input type="checkbox"/> First Reconciliation	<input type="checkbox"/> Confirmation
_____	_____	M F	<input type="checkbox"/> Baptism	<input type="checkbox"/> First Communion
_____	_____	M F	<input type="checkbox"/> First Reconciliation	<input type="checkbox"/> Confirmation
_____	_____	M F	<input type="checkbox"/> Baptism	<input type="checkbox"/> First Communion
_____	_____	M F	<input type="checkbox"/> First Reconciliation	<input type="checkbox"/> Confirmation
_____	_____	M F	<input type="checkbox"/> Baptism	<input type="checkbox"/> First Communion
_____	_____	M F	<input type="checkbox"/> First Reconciliation	<input type="checkbox"/> Confirmation

Please select one: Would you like to learn about donating online through our WeShare?
or
Would you like Church Contribution Envelopes mailed to you instead?

Please turn to back of form to complete registration.

For Parish Office Use only: Registration Date _____ Envelope # _____ Circle _____

At Immaculate Conception parish, our ministries continue to function because of the generous spirit of our community. We ask that all parishioners prayerfully consider assisting in these ministries. Part of our baptismal call as Catholics is to put our faith into action by using our time, talent, and treasure to serve Christ in those around us. Please indicate areas of interest to you.

- | | | | |
|--|--|---------------------------------------|---|
| <input type="checkbox"/> Greeter | <input type="checkbox"/> Usher | <input type="checkbox"/> Altar Server | <input type="checkbox"/> Music Ministry |
| <input type="checkbox"/> Church Cleaning | <input type="checkbox"/> Security (assist with safety at the Church during Mass) | | |
| <input type="checkbox"/> Youth Ministry | <input type="checkbox"/> Catechesis for 1st Reconciliation/Eucharist program | | |
| <input type="checkbox"/> R.C.I.A. | <input type="checkbox"/> Continued Adult Faith Formation programs | | |
| <input type="checkbox"/> Young Adults | <input type="checkbox"/> Children's Liturgy of the Word | | |

- | | |
|--|--|
| <input type="checkbox"/> Ministers to the Sick and Elderly | <input type="checkbox"/> Welcoming Committee |
| <input type="checkbox"/> Clean and return Altar Linens | <input type="checkbox"/> Vocations Ministry |
| <input type="checkbox"/> After Mass Refreshments | <input type="checkbox"/> Pro-Life Ministry |
| <input type="checkbox"/> Prayer Chain (<i>be notified of prayer requests to help us support the intentions of our community</i>) | |
| <input type="checkbox"/> Bereavement Ministry (<i>liturgical assistance and follow-up support</i>) | |
| <input type="checkbox"/> St. Martha Ministry (<i>assisting with funeral reception set up and take down</i>) | |
| <input type="checkbox"/> Provide a main dish, side, or dessert for funerals (and other events on occasion) | |
| <input type="checkbox"/> Nocturnal Adoration (<i>first full weekend of every month, 1 hour slots, times are rotated through</i>) | |

Don't see anything that fits your interest? Consider your talents and let us know how you can best use your gifts to make our community better.

Do you have a need we can help you with? (example: visit from a priest)

We understand that you have responsibilities in life that keep you busy, so we ask only that you give the available time and talent you have. Please indicate how often you feel available to help overall:

- | | | | |
|--|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> once a day | <input type="checkbox"/> once a week | <input type="checkbox"/> once a month | <input type="checkbox"/> once a year |
| <input type="checkbox"/> other: _____ a _____ <i>example: <u>twice</u> a <u>month</u></i>
<small>number of times time period number of times time period</small> | | | |

On behalf of the Immaculate Conception community, thank you!

If you have any questions, comments, or suggestions, please contact the Stewardship Coordinator at stewardship@immacstayton.org