



The Church of St. Patrick Registration Form



Welcome to the Church of Patrick and to our parish family. Please let us know about you and your family and your interests by completing the form below

Date _____

Last Name First Name DOB Religion

Spouse's Name DOB Religion

Address City / State Zip Code

Cell Phone# Home/Other Phone # Email

Employment or Retired From (His)

Employment or Retired From (Hers)

PLEASE CHECK ONE

Single ☐

Divorced ☐

Widowed ☐

Children Living at Home

Childs Name	DOB			Baptism		1 ST Communion		Confirmation	
		F	M	YES	NO	YES	NO	YES	NO
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you like Offertory Envelopes? Yes ☐ No ☐

To register for Online Giving: www.ChurchofStPatrick.org then Click on Donate Online

**Our Parish has many outstanding ministries and activities.
Please circle the ministry you want to know more about.**

- | | | |
|--|---|---|
| <input type="checkbox"/> ALTAR LINEN | <input type="checkbox"/> HEALTH & CARING MINISTRY | <input type="checkbox"/> RELIGIOUS ED – FAITH FORMATION |
| <input type="checkbox"/> ALTAR SERVERS | <input type="checkbox"/> KNIGHTS OF COLUMBUS | <input type="checkbox"/> RESPECT LIFE |
| <input type="checkbox"/> ADORATION | <input type="checkbox"/> LADIES AUXILLARY | <input type="checkbox"/> USHERS / GREETERS |
| <input type="checkbox"/> BEREAVEMENT SUPPORT GROUP | <input type="checkbox"/> LECTOR | <input type="checkbox"/> WOMEN'S CLUB |
| <input type="checkbox"/> CATECHIST | <input type="checkbox"/> LITURGICAL DECORATING | <input type="checkbox"/> HOSPITALITY |
| <input type="checkbox"/> CHOIR | <input type="checkbox"/> PEW CREW | <input type="checkbox"/> YOUTH MINISTRY |
| <input type="checkbox"/> DEVINE MERCY CHAPLET | <input type="checkbox"/> PRISON MINISTRY | <input type="checkbox"/> BIBLE STUDY |
| <input type="checkbox"/> EUCHARISTIC MINISTER | <input type="checkbox"/> RCIA | <input type="checkbox"/> OUT & ABOUT SOCIAL GROUP |

Office Use On/y: DB Entry _____ Envelope # _____ On-line Giving _____ Ministry Contacted _____ Letter Sent _____