



**Saint Christine's
Parish Family**

Family Last Name: _____

Registration

Date this form completed: _____

Street _____ Town _____
Zip Code _____ Mailing address (if different) _____
Telephone _____ E-mail _____

HEAD(S) OF HOUSEHOLD

Male Last Name _____ Middle Initial (MI) _____ First Name _____ Date of Birth (DOB) _____ Religion _____ Sacraments (Check if you have received) Baptism: Eucharist: Confirmation: Marital Status: _____ Married by priest? Yes No Occupation _____ Highest Level/Education _____

Female Last Name _____ MI _____ Maiden Name _____ First Name _____ Date of Birth _____ Religion _____ Sacraments (Check if you have received) Baptism: Eucharist: Confirmation: Marital Status: _____ Married by priest? Yes No Occupation _____ Highest Level/Education _____

CHILDREN

First Name _____ MI _____ Last Name _____ DOB _____ Sex M / F
Baptism Eucharist Penance Confirmation

First Name _____ MI _____ Last Name _____ DOB _____ Sex M / F
Baptism Eucharist Penance Confirmation

First Name _____ MI _____ Last Name _____ DOB _____ Sex M / F
Baptism Eucharist Penance Confirmation

First Name _____ MI _____ Last Name _____ DOB _____ Sex M / F
Baptism Eucharist Penance Confirmation

OTHER MEMBERS OF HOUSEHOLD

First Name _____ MI _____ Last Name _____ DOB _____ Sex M / F

OTHER INFORMATION

Do you use collection envelopes? Yes No If no, do you want to receive envelopes? Yes
Do you need communion brought to residence? Yes
How frequently do you attend church? Weekly Monthly On occasion
Would you like to speak to a priest? Yes No

Parish Life Activities

Family Name _____

	Name(s)	Presently Involved	Name(s)	Would like to Be Involved
Altar Server	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Babysitting (Mass)	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Baptism Catechesis	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Bereavement Ministry	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Bible Study	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Catholic Womens Group	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
CCD Teacher	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
CCD Aide	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Choir - Adult	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Choir- Youth	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Choir -Childrens	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Christian Meditation	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Eucharistic Minister	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Finance Committee	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Folk Group	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Giving Tree	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Golf Tournament	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Lector	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Liturgy Committee	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Men's Group	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Ministry of Mom's Sharing (MOMS)	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Moms & Tots	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Parish Council	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Prayer Shawl Ministry	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Pre-Cana	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
R.C.I.A.	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Social Activities	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
St. Vincent de Paul	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Usher & Greeter	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Visitor to sick & elderly	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Youth Ministry	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Youth Service Corps	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
Vocation Committee	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>