

# St. Anthony Parish Registration Form

\_\_\_\_\_  
[Parish Number]

Please print using a pen.

Today's Date: \_\_\_\_ | \_\_\_\_ | \_\_\_\_  
Month Day Year

## INFORMATION

_____ LAST NAME		_____ HUSBAND		_____ WIFE		<input type="checkbox"/> MR <input type="checkbox"/> MRS <input type="checkbox"/> MR & MRS. <input type="checkbox"/> MS <input type="checkbox"/> MISS
_____ STREET ADDRESS		_____ APT. NO.		_____ CITY		_____ ZIP CODE
( ) _____ cell phone #		(408) _____ <input type="checkbox"/> Unlisted		<i>We will send Sunday stewardship envelopes to you in about two months.          (Every parishioner is expected to support the work of the church only the amount          differs from family to family in terms of time, talent or treasure.)</i>		

**ADULT:** HUSBAND or head of household

_____ FIRST NAME (and Nickname)		_____ DATE OF BIRTH		_____ PLACE OF BIRTH (City and State/Country)	
_____ OCCUPATION		_____ RELIGION		SACRAMENTS RECEIVED <input type="checkbox"/> BAPTISM _____ <input type="checkbox"/> COMMUNION _____ <input type="checkbox"/> CONFIRMATION _____	
_____ WORK PHONE or CELL PHONE: (____) _____		_____ LANGUAGES SPOKEN		_____ HIGHEST GRADE	
<input type="checkbox"/> SINGLE <input type="checkbox"/> CATHOLIC WEDDING <input type="checkbox"/> SEPARATED <input type="checkbox"/> WIDOWED <input type="checkbox"/> NON CATHOLIC WEDDING <input type="checkbox"/> DIVORCED		_____ DATE OF MARRIAGE			

\_\_\_\_\_  
Email address

**ADULT:** WIFE or other adult living at residence

_____ FIRST NAME (& Maiden Name)		_____ DATE OF BIRTH		_____ PLACE OF BIRTH (City, State/Country)	
_____ OCCUPATION		_____ RELIGION		SACRAMENTS RECEIVED <input type="checkbox"/> BAPTISM _____ <input type="checkbox"/> COMMUNION _____ <input type="checkbox"/> CONFIRMATION _____	
_____ WORK PHONE or CELL PHONE: (____) _____		_____ LANGUAGES SPOKEN		_____ HIGHEST GRADE.	

\_\_\_\_\_  
Email Address

SPECIAL INTERESTS, TALENTS OR SKILLS: \_\_\_\_\_

(Please indicate if you are serving as a lector, Eucharistic Minister, Server or a member of any organization in the parish. If you have a skill or talent you can share, please list: e.g. clerical skills, carpentry, baking, phoning, etc). [continued on next page]

**CHILDREN LIVING AT HOME (under age 18):***(Adult children, eighteen or older, living with parents should fill out their own registration form.)*

NAME _____	DATE OF BIRTH _____	PLACE OF BIRTH (City and State/Country) _____
SCHOOL OR OCCUPATION _____	RELIGION _____	SACRAMENTS RECEIVED
CELL PHONE NUMBER: _____		<input type="checkbox"/> BAPTISM
		<input type="checkbox"/> COMMUNION
		<input type="checkbox"/> CONFIRMATION

LANGUAGES SPOKEN _____	GRADE OR HIGHEST GRADE _____
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Email Address: \_\_\_\_\_

**CHILD:**

FIRST NAME _____	DATE OF BIRTH _____	PLACE OF BIRTH (City and State/Country) _____
SCHOOL OR OCCUPATION _____	RELIGION _____	SACRAMENTS RECEIVED
CELL PHONE NUMBER: _____		<input type="checkbox"/> BAPTISM
		<input type="checkbox"/> COMMUNION
		<input type="checkbox"/> CONFIRMATION

LANGUAGES SPOKEN _____	HIGHEST GRADE _____
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Email Address: \_\_\_\_\_

**CHILD:**

FIRST NAME _____	DATE OF BIRTH _____	PLACE OF BIRTH (City and State/Country) _____
SCHOOL OR OCCUPATION _____	RELIGION _____	SACRAMENTS RECEIVED
		<input type="checkbox"/> BAPTISM
		<input type="checkbox"/> COMMUNION
		<input type="checkbox"/> CONFIRMATION

LANGUAGES SPOKEN _____	HIGHEST GRADE _____
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**CHILD:**

FIRST NAME _____	DATE OF BIRTH _____	PLACE OF BIRTH (City and State/Country) _____
OCCUPATION _____	RELIGION _____	SACRAMENTS RECEIVED
Cell phone number: _____		<input type="checkbox"/> BAPTIZED
		<input type="checkbox"/> COMMUNION
		<input type="checkbox"/> CONFIRMATION

LANGUAGES SPOKEN _____	HIGHEST GRADE _____
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**What ministries would you consider participating in?** *(Use initials after each ministry to specify the member who participates or wishes to participate)*

Music \_\_\_ Lector \_\_\_ Eucharistic Minister \_\_\_ Altar Serving \_\_\_ Greeter &amp; Usher \_\_\_ Cleaning Mass/altar linens \_\_\_

Helping to clean and maintain the Small church on Bertram \_\_\_ Liturgy Planning \_\_\_ Gardening \_\_\_

**Parish Committees:** Religious Education \_\_\_ Senior's Group \_\_\_ Welcome & Hospitality \_\_\_

Fundraising \_\_\_ Stewardship \_\_\_ Planning Social Events \_\_\_ Outreach \_\_\_ Buildings and Grounds \_\_\_ Youth Ministry \_\_\_