

☐ Children's Liturgy

☐ Minister of Hospitality/Usher ☐ Social

St. Patrick's Parish Parish Registration Form

Parish Registration Form Date Input P/T: _____ Initials: _____ Welcome to St. Patrick's Parish. Date of Registration: Envelope #: _____ PLEASE PRINT ALL INFORMATION Applicant: (Main Contact, Tax Recipient) Given Name Surname Spouse
_____ Given Name Surname (if different from above) Address: Street Name Apt # City Postal Code Phone #: __ Home ☐ Cell Business ☐ Home ☐ Cell ☐ Business Email: Date of Marriage: □church □ civil Place of Marriage (include name and location of church) Baptized R.C. Confirmed Occupation No Yes Applicant Yes No Spouse Yes No ☐ Yes □ No Children (living at home) Name Date of Birth School (given name, surname) (dd/mm/yyyy)

OFFICE USE ONLY

PLEASE CONTACT PARISH OFFICE IF ANY OF THE ABOVE INFORMATION CHANGES

Lector

Youth Group

☐ Music Ministry

Are you interested in volunteering for any of the following ministries/activities?

Eucharistic Minister