

Ss. Simon and Jude Catholic Community – Parishioner Registration Form

Today's Date: _____ Check: I/We wish to register as new parishioners I/We are updating our family information

1. Head of Household (Mr./Mrs./Ms./Dr.): _____
(Note: Mail addressed to your family from our parish will always be addressed to the head of household.)

2. Mailing Address: _____ City & Zip: _____

3. Phone #1: _____ (circle one) home/cell/work Phone #2: _____ (circle one) home/cell/work

4. Email Address: _____
(Note: Your e-mail will be used for business purposes only. We will not sell or share your e-mail information with any external organization.)

5. Should we contact your family using (check one): Phone #1 Phone #2 E-mail Facebook

6. Which languages, other than English, are spoken in your household? _____

7. Please list below **ALL** members (including the head of household above) living in your family/household, including sacraments received, to help us with ministering to your family members:

	First Name	Last Name	Previous/ Maiden Name	Birthdate M/D/Y	Gender M/F	Occupation	Baptized? Y / N	Confirmed? Y / N	Married? Y / N	Catholic? Y / N
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										

8. Do you, or another member of your family, hold a membership in a local public, civic or community organization? If so, please list below along with each family member's name:

9. Do you and the members of your family have any hobbies, pastimes or special interests you'd like to share with us? If so, please list below along with each family member's name:

10. Occasionally we need skilled trades & professionals to volunteer for one-time parish projects. Would you, or any member of your family, be available to volunteer in any of the following areas?

Please identify each family member using the number on the reverse side of the form and check all that apply:

- | | | | | |
|--|---|--|---|--|
| <input type="checkbox"/> Carpentry _____ | <input type="checkbox"/> HVAC _____ | <input type="checkbox"/> Mechanic _____ | <input type="checkbox"/> Electrician _____ | <input type="checkbox"/> Masonry _____ |
| <input type="checkbox"/> Plumbing _____ | <input type="checkbox"/> Cleaning _____ | <input type="checkbox"/> Painting _____ | <input type="checkbox"/> Real Estate _____ | <input type="checkbox"/> Building Inspection _____ |
| <input type="checkbox"/> Video/Sound _____ | <input type="checkbox"/> Website Design _____ | <input type="checkbox"/> Graphic Design _____ | <input type="checkbox"/> Event Planning _____ | <input type="checkbox"/> Marketing/Publicity _____ |
| <input type="checkbox"/> Attorney _____ | <input type="checkbox"/> CPA/Accounting _____ | <input type="checkbox"/> Banking/Finance _____ | <input type="checkbox"/> Cook/Bake _____ | <input type="checkbox"/> Interior Decorating _____ |
| <input type="checkbox"/> Gardening _____ | <input type="checkbox"/> Sewing/Crafts _____ | <input type="checkbox"/> Teaching _____ | <input type="checkbox"/> Coaching _____ | <input type="checkbox"/> Musician/Singer _____ |
| <input type="checkbox"/> Nurse _____ | <input type="checkbox"/> Doctor/Dentist _____ | <input type="checkbox"/> EMS _____ | <input type="checkbox"/> Fire/Police _____ | <input type="checkbox"/> _____ |

11. List below any special needs or information we should know which will help our parish staff minister to you and your family members:

Thank you for registering with Ss. Simon & Jude Catholic Community!

Parish Office Use Only: Env. No.: _____ Date Reg. _____ Letter _____ Card _____ Comp _____ FFC _____ GB _____ Dir _____ CSA _____ Bul _____ OSV _____