

St. Matthew Catholic Church Parish Registration

Please clearly print all information

FAMILY NAME: _____

Date _____

Current Address _____
Number & Street
City
State
Zip Code

Date moved to current address: _____ Marital Status: Married Separated Divorced Widowed Single

Telephone Numbers: Home: _____ Daytime: _____ / _____ / _____
Husband
cell
Wife
cell

Email: _____

Name of Prior Parish _____ City and State _____

Former Pastor's Name: _____ Diocese of: _____

Did you serve in any ministries in your former Parish? Yes No If so, What did you do? _____

Heads of Household			Date of Birth	Religion	Baptism Yes/No	Holy Communion Yes/No	Confirmation Yes/No	Catholic Marriage Yes/No	Occupation
Last Name	First	M.I.							

Children Living at Home			M	F	Date of Birth	Baptism Yes/No	Holy Communion Yes/No	Confirmation Yes/No	Attends Religious Education Yes/No
Last Name	First	M.I.							

Do you or your family have any special needs we may be able to serve? _____

For staff use only

Signature of intake person _____ Date: _____

Map Coordinates: _____ Parish Boundary: _____ Pastor Signature: _____

Are you able to participate, pitch in, and help out with making our Parish family the Community of Saints it is called to be?

Here are a few areas where we could use a hand.....Please put a check mark next to the areas of interest or service that might appeal to you.....

_____ Altar Servers

_____ Gardening/Landscaping

_____ Automotive Maintenance

_____ Good Samaritans/Homebound Ministry

_____ Bereavement

_____ Knights of Columbus

_____ Carpentry

_____ Lawyer/Legal Counsel

_____ Choir

_____ Mary's Shelter (For unwed mothers)

_____ Carpentry

_____ Office Work

_____ Celebrations Committee

_____ Religious Education

_____ Choir

_____ St. Vincent de Paul (Outreach/Thrift Shop)

_____ Computer Repair

_____ Ushers/Greeters

_____ Electrical Work

_____ Other: _____

_____ Eucharistic Adoration

_____ Food Pantry

Any Questions or Comments?

May God Love and Bless You

Fr. Eversole