

ST ELIZABETH ANN SETON PARISH REGISTRATION FORM

Revised Sept
2014

INSTRUCTIONS: Please PRINT clearly.

FAMILY ID# _____

Family Last Name _____ Today's Date _____

First Name _____ Spouse First Name _____

How would you like your mail addressed? Mr./Mrs. Mr. Mrs. Miss Other _____

Street Address _____

City _____ State _____ Zip + four _____

Home Phone _____ Unlisted (Y/N___) His Cell Phone _____

Her Cell Phone _____ May we publish your address in the Parish Directory? Yes No

May we publish your phone in the Parish Directory? Yes No

If you only use a cell phone, which cell phone number should we list in the directory? _____

Family E-mail _____

This e-mail will be used for parish communications to the family.

If you wish to receive e-mails at additional e-mail addresses please list

His E-mail _____ Her E-mail _____

What is the best way to reach you? Home Phone Cell Phone E-mail Mail _____ Other _____

Marital Status: Married (By a Catholic Priest/Deacon or sanctioned by the Catholic Church: Yes No)

Marriage Date: _____ Church name where married _____

Church city, state _____

Single Separated Widowed Divorced Annulled Married Civilly Non-Church

Our choice for Stewardship of Treasure will be

Envelopes On- Line Giving (Office use: Temp envelopes mailed _____)

Mass preference

4:00 pm Saturday 8:30 am Sunday 11:00 am Sunday 8:00 am Daily Mass

We (I) attend Mass: daily weekly bimonthly monthly Holidays only

Previous Parish (Name & Location) _____

Please be sure to notify your previous parish of the transfer of membership to Saint Elizabeth Ann Seton.

Notified? (Y/N) _____

How Can We Help You?

A member of the staff would be happy to contact you if you have questions about any of the following.

Baptism Reconciliation First Communion Confirmation Wedding Annulment

Parish School of Religion Regional School HS & JR High Ministry Young Adult Ministry (age 18-35)

I would like to talk with a Priest Other _____

ST ELIZABETH ANN SETON PARISH REGISTRATION FORM

Revised Sept
2014

FAMILY INFORMATION

Include all children in the home who are to be counted as part of your household. Children over 18-20 should register as a young adult. Everyone 21 and older **MUST** register under their own name. Please list Date for Sacraments. (Baptism, 1st Communion, Confirmation)

	SELF	SPOUSE	CHILD	CHILD
First Name				
Nickname				
Middle Name				
Last Name if Different				
Maiden Name			XXXXXX	XXXXXX
Gender (M/F)				
Date of Birth				
Religion(specify)				
Employer			XXXXX	XXXXX
Position/Type of Work			XXXXX	XXXXX
Work Number			XXXXX	XXXXX
School	XXXXX	XXXXX		
Grade/ School Year	XXXXX	XXXXX	Grade____ 20__-20__	Grade____ 20__-20__
Baptism (Date) Church Name City, State	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No
First Communion Church Name City, State	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No
Confirmation Church Name City, State	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No	<input type="radio"/> Yes_____ <input type="radio"/> No
Ministry Interest*				
Talent Interest**				
Special Needs				

Family info - Additional Children (Cont'd)

	CHILD	CHILD	CHILD	CHILD
First Name				
Nickname				
Middle Name				
Last Name if Different				

ST ELIZABETH ANN SETON PARISH REGISTRATION FORM

Revised Sept
2014

CHILD's Name <i>continued</i>				
Gender				
Date of Birth				
Religion(specify)				
School				
Grade School Year	Grade __ 20__ - 20__	Grade __ 20__ - 20__	Grade __ 20__ - 20__	Grade __ 20__ - 20__
Baptism (Date)	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No
Church Name City, State				
First Communion Church Name City, State	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No
Confirmation Church Name City, State	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No	<input type="radio"/> Yes _____ <input type="radio"/> No
Ministry Interest*				
Talent Interest**				
Special Needs				

*Ministry Opportunities

Parish Website www.seasnh.org has complete description of ministries.

Liturgical Ministries: Altar Server, Eucharistic Minister, Ministry to the Homebound, Greeter/Usher, Lector, Liturgical Musicians, Cantor, Adult Choir, Adult hand bell Choir, Children's Choir, Children's Hand bell Choir, Resurrection Choir (Funerals), Children's Liturgy of the Word

Service Ministries: Christian Mothers, Seton Men's Group, Parish Finance Council, Parish Pastoral Council

Parish Service Ministries: Caring Friends Funeral Luncheon, Operation Lunch Bag, Holiday Dinner Totes

Educational Ministries: Religious Formation Class Teacher/Aide (K-4), Junior Youth Ministry Teacher/Aide (Grades 5-8), Senior Youth Ministry Teacher/Aide (Grade 9-12), Young Adult Ministry (Ages 18-30+)

Other Parish Ministries: Adult Altar Server for funeral Mass, Help at a Parish Event, Garden & Grounds, Parish Picnic, Hospitality for church events, Fish Fry Volunteer, Church Cleaning (Spring & Fall), Vacation Bible School (VBS), RCIA Sponsor, Church decorating, Prayer Chain Warrior, Money Counting Team, Celebrate Life (Baptism)

**I have these talents to share

Data Input, Typing, Graphics, Marketing, Publicity, Video Editing, Drama, Bake/Cook, Computer, Knitting, Crochet, Phone Calling, Sewing, PowerPoint, Child Care, Gardening, Mailings, Photography, Writer, Fundraiser
Other _____

Prior Training – List first name of person

_____ Eucharistic Minister

_____ Lector

_____ Mass Server

_____ Catechist

_____ Attended Virtus training: Date _____ Location _____

Office Use Only:

Date Received: _____

Date Entered in PDS: _____

Entered by: _____

Check List:

_____ **Welcome/Thank you for registering**

_____ **Notify appropriate staff and ministries for interests and help needed**

Staff or ministry member name

Staff or ministry member name

Staff or ministry member name

Staff or ministry member name

_____ **Updated Constant Contact**

_____ **Notified Jane Long at Diocese for DLA & Catholic Accent**

_____ **Ministry/Talents Lists for PDS**