

ST. BERNARD CATHOLIC CHURCH

PARISH REGISTRATION FORM

Welcome to St. Bernard Parish! We are happy to have you as part of our parish family.

FAMILY INFORMATION

Family Last Name: _____

Head of Household	Spouse (if applicable)
First / Middle Name: _____	First / Middle Name: _____
Date of Birth: _____	Date of Birth: _____
Occupation: _____ Cell: _____	Occupation: _____ Cell: _____
Email: _____	Email: _____

ADDRESS & CONTACT

Street Address: _____		
City: _____	State: _____	Zip: _____
Seasonal Address (if applicable): _____		
Home Phone: _____ Preferred Email for Parish Communications: _____		

CHILDREN LIVING AT HOME

Name	Date of Birth	Baptized?	First Communion?	Confirmed?
		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

SACRAMENTAL & MARITAL STATUS

Head of Household	Spouse (if applicable)
Baptized Catholic? ☐ Yes ☐ No First Communion? ☐ Yes ☐ No Confirmed? ☐ Yes ☐ No	Baptized Catholic? ☐ Yes ☐ No First Communion? ☐ Yes ☐ No Confirmed? ☐ Yes ☐ No

Marital Status: ☐ Single ☐ Married ☐ Widowed ☐ Divorced

PARISH INVOLVEMENT

I am interested in learning more about:

- ☐ Lector Ministry ☐ Extraordinary Ministers of Holy Communion ☐ Ushers/Greeters
☐ Choir/Music Ministry ☐ Religious Education ☐ St. Bernard Woman ☐ Altar Server
☐ Parish Events ☐ Volunteer Opportunities ☐ Other: _____

STEWARDSHIP & EMERGENCY CONTACT

Would you like offertory envelopes? ☐ Yes ☐ No

Emergency Contact Name: _____

Relationship: _____ Phone: _____

OFFICE USE ONLY	
Date Registered: _____	Parish/Family ID: _____
Envelope Number: _____	Entered By: _____