## ST. ALOYSIUS R.C. CHURCH - PARISH REGISTRATION

	DATE:											
	<u>PLEASE PRINT</u>											
EAMILY NAME (Lost Nome												
	Last Name Only)											
									ZIP CODE CELL PHONE			
										DRESS		
			<i>IF MARRIED</i> , PLEASE CHECK ONE: MON LAW [] DIVORCED [] WIDOWED [] SEPARATED									
PRIMARY LANGUAGE: [ ] ENGL NAMES (of Adults) (INCLUDE MAIDEN NAME)		RELIGION			ISH [] OTHE. DATE OF BIRTH		R E-MAIL BAPTIZED YES/NO			SERRED: [] Y COMMUNION YES / NO	ES    NO CONFIRMED YES / NO	
DEPENDENT CHILDREN AT HOME (LAST NAME IF DIFFERENT)		IGION	M/F		FAMILY LATIONSHIP		ATE OF IRTH	BAPTIZEI YES / NO		COMMUNION YES / NO	CONFIRMED YES / NO	
LITURGICAL MINISTRIES	<u> </u>	SOC	CIETY	Y OF	ST. VINCEN	ТГ	DE PAU	L	]	L FUNDRAISING	EVENTS	
□ Lector (Reader at Mass)	□ Active Membership □ Parish Picnic											
□ Art & Environment	□ Associate Membership (Pantry) OTHER											
□ Minister of Hospitality (Ushers)	<b>COMMUNITY LIFE/SERVICE</b> Rosary Society											
□ Altar Servers	□ Senior Parishioners □ Living in the Spirit Prayer Gro										pirit Prayer Group	
Extraordinary Ministers of	Respect Life/Gabriel Project								□ Guadalupana Group			
Holy Communion	FAITH FORMATION											
Ministry to the Sick	Religious Education Catechist								After prayerful consideration, please			
Nursing Home Ministry	□ Rite of Christian Initiation of Adults (RCIA											
□ Sacristans	□ Sponsor make a commitm									nitment to		
□ Choir - 5:00 pm (Saturday)	□ Catechist								our ministries (please			
□ Choir - 10:15 am (Sunday)	□ Adult Faith Formation								che	ck appropr	iate boxes).	