

## Mater Dolorosa Catholic Church Registration Form (All Information is Confidential for Church Use Only)

**PLEASE PRINT**

Today/s Date \_\_\_\_\_

Marital Status     Single     Engaged     Married     Widowed     Divorced     Divorced and Remarried

Title     Mr.     Mrs.     Ms.     Mr. and Mrs.     Other \_\_\_\_\_

Head of Household Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Spouse/Partner's Last Name (if different) \_\_\_\_\_

Mailing Address \_\_\_\_\_ Apt/Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Celt Phone (Spouse) \_\_\_\_\_

Family E-Mail \_\_\_\_\_ **Blue Envelopes**  Yes     Not

Have you converted into the Catholic Faith yes\_\_\_ no\_\_\_ Were you married in the Catholic Church yes\_\_\_ no

info	Head of Household	Spouse/Partner	Family Member	Family Member	Family Member
Name					
Gender					
Date of Birth					
Relationship					
Employer					
Occupation					
Work Phone #					
Celt Phone #					
Baptism (Mo/Yr)					
Church Location					
first Eucharist Mo/Yr.)					
Church Location					
Confirmation (Mo/Yr.)					
Church Location					
Marriage (Mo/Yr.)					
Church Location					

Please check by items you have an interest in a volunteer or if you presently serve in any of these ministries:

Extra Ordinary Minister of Holy Communion in Church

Extra Ordinary Minister of Holy Communion to Homebound

Usher

Prayer

Music Ministry

Prayer Group/Rosary

Knight of Columbus

Adoration

Other \_\_\_\_\_

Lector

Catechist for Sunday School

RCIA/Catechist Sponsor

Study Group

Pro-life

What Mass do you usually attend? \_\_\_\_\_

What can we do to make you more welcome?

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**For Office Use Only**

Pastor     Welcome     Box     Envelope Number     Computer     Home Visit