

THIS INFORMATION IS CONFIDENTIAL! IT WILL BE USED ONLY BY CHURCH OFFICE STAFF FOR PARISH BUSINESS.

GOOD SHEPHERD PARISH CENSUS/REGISTRATION FORM

Date: _____

Leave blank any spaces that do not apply. Use an additional form for 5+ family members. *Please! Complete reverse side.*

Approx. # years in parish _____

Currently using donation envelopes? YES NO

Envelope number (if known) _____

If no, do you want them?
 YES NO

Family Name _____ Family Phone _____

Street Address _____ City/ST _____ Zip _____

Mailing Address (if different from above) _____ City/ST _____ Zip _____

FAMILY MEMBER #1

First Name: _____ Middle Name: _____ Last Name: _____ Gender: M F Birthday _____

Cell Phone: _____ Work Phone: _____ Email: _____

Marital Status: _____ Religion: _____ Occupation: _____ Education _____

Sacraments (Yes or No, give dates if known): Baptism: _____ 1st Holy Communion: _____ Confirmation: _____ Holy Matrimony: _____

FAMILY MEMBER #2

Relationship to Member #1: _____ School (if school age child) _____

First Name: _____ Middle Name: _____ Last Name: _____ Gender: M F Birthday _____

Cell Phone: _____ Work Phone: _____ Email: _____

Marital Status: _____ Religion: _____ Occupation: _____ Education _____

Sacraments (Yes or No, give dates if known): Baptism: _____ 1st Holy Communion: _____ Confirmation: _____ Holy Matrimony: _____

FAMILY MEMBER #3

Relationship to Member #1: _____ School (if school age child) _____

First Name: _____ Middle Name: _____ Last Name: _____ Gender: M F Birthday _____

Cell Phone: _____ Work Phone: _____ Email: _____

Marital Status: _____ Religion: _____ Occupation: _____ Education _____

Sacraments (Yes or No, give dates if known): Baptism: _____ 1st Holy Communion: _____ Confirmation: _____ Holy Matrimony: _____

FAMILY MEMBER #4

Relationship to Member #1: _____ School (if school age child) _____

First Name: _____ Middle Name: _____ Last Name: _____ Gender: M F Birthday _____

Cell Phone: _____ Work Phone: _____ Email: _____

Marital Status: _____ Religion: _____ Occupation: _____ Education _____

Sacraments (Yes or No, give dates if known): Baptism: _____ 1st Holy Communion: _____ Confirmation: _____ Holy Matrimony: _____

GOOD SHEPHERD PARISH

APOSTOLATE SURVEY

WOULD YOU LIKE YOUR FAMILY AND CONTACT INFORMATION PUBLISHED IN A PARISH DIRECTORY?

YES NO

Please use the space below to indicate any restrictions.

Want to be more involved in the parish? Have a look at our liturgical and apostolate groups. Please write in individual names if there is more than one person in your household.

Volunteers in liturgical groups directly support liturgical celebrations. Some activities require training which is available through the parish or Archdiocese. An apostolate provides service to the parish or community.

	Currently participate in:	Please contact me with information:	Please describe any special skills you wish to share with your parish community. (Building trades, organizational, professional, teacher, etc.)
LITURGY			
Liturgy Committee			
Extraordinary Ministers of the Eucharist(EMCH)*			
Lectors*			
Ushers			
Altar Servers*			
Good Shepherd Choir			
Altar Society			
EMCH to Homebound & Nursing Homes*			
APOSTOLATES			
Rite of Christian Initiation of Adults (RCIA)			
Youth Religious Education (CCD)			
Apostolate Fair Committee			
Parish Life Sunday (hospitality) <i>[in development]</i>			
Dead Theologians Society (Young Adults)			
Knights of Columbus			
Society of St. Vincent de Paul			
Rebuild Center Support Group (meals for homeless)			
Ozanam Inn Support (meals for homeless)			
Life and Dignity Ministry			
Friends of Our Lady of Good Counsel			
Friends of St. Henry			
Event Planning (St. Joseph Altar, Lenten fish fry, Mardi Gras, etc.)			
Rectory Volunteers (help with record keeping and other clerical tasks)			
Prayer Line (parish intentions) <i>[in development]</i>			
Building Committee			
ADMINISTRATIVE COUNCILS <i>(by invitation from the pastor)</i>			
Parish Council			
Finance Committee			
*Training required			