



ID Number \_\_\_\_\_

**FAMILY INFORMATION**

Family Last Name \_\_\_\_\_

Street \_\_\_\_\_

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

Home Phone \_\_\_\_\_

Would you like to be listed in our Parish Directory?

Yes If yes, please specify your options:  
 Name Only  Phone  Address

No

Treasury Options:

Envelopes  Online Giving

**INDIVIDUAL INFORMATION**

Head of Household

First \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Languages (other than English) \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Religion \_\_\_\_\_ DOB \_\_\_\_\_

M  F  
Gender \_\_\_\_\_ Highest Grade \_\_\_\_\_

Cell Phone \_\_\_\_\_

Disability/Needs \_\_\_\_\_

Spouse

First \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Languages (other than English) \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Religion \_\_\_\_\_ DOB \_\_\_\_\_

M  F  
Gender \_\_\_\_\_ Highest Grade \_\_\_\_\_

Cell Phone \_\_\_\_\_

Disability/Needs \_\_\_\_\_

Married in the Catholic Church  Married in other Church  Divorced  Separated  Widowed

**CHILDREN INFORMATION (For children under 18)**

CHILD: First Name \_\_\_\_\_ Last Name (if different than parents) \_\_\_\_\_

Languages (other than English) \_\_\_\_\_

Disability/Needs \_\_\_\_\_

Religion \_\_\_\_\_ DOB \_\_\_\_\_

M  F  
Gender \_\_\_\_\_ Cell Phone \_\_\_\_\_

Please return your REGISTRATION FORM to the Parish Office.

<b>CHILD:</b> First Name	Last Name (if different than parents)	Religion	DOB
Languages (other than English)		<input type="checkbox"/> M <input type="checkbox"/> F Gender	Cell Phone
Disability/Needs			
<b>CHILD:</b> First Name	Last Name (if different than parents)	Religion	DOB
Languages (other than English)		<input type="checkbox"/> M <input type="checkbox"/> F Gender	Cell Phone
Disability/Needs			
<b>CHILD:</b> First Name	Last Name (if different than parents)	Religion	DOB
Languages (other than English)		<input type="checkbox"/> M <input type="checkbox"/> F Gender	Cell Phone
Disability/Needs			
<b>CHILD:</b> First Name	Last Name (if different than parents)	Religion	DOB
Languages (other than English)		<input type="checkbox"/> M <input type="checkbox"/> F Gender	Cell Phone
Disability/Needs			

## MINISTRIES REFERENCE GUIDE\*

### DISCIPLESHIP

D01 Finance Council  
D02 Gardening & Grounds  
D03 Grocery Card Sales  
D04 Morning Church Crew  
D05 Office Volunteer  
D06 Parish Council  
D07 Knights Of Columbus  
D08 Pax Moms Group  
D09 Nursery  
D10 Newcomers Ministry  
D11 Seniors 50+  
D12 Spirit Gardens  
D13 Bible Studies  
D14 GIFT Catechist  
D15 GIFT Aides  
D16 Goods Case  
D17 Faith Formation Committee  
D18 Adult CORE Team  
D19 High School Mentor  
D20 Confirmation CORE Team

D21 Confirmation Prep Team (Adult)  
D22 Chaperone  
D23 Adult Work Camper  
D24 Youth Work Camper  
D25 Contemplative Prayer (Wed.)  
D26 Point Men of Pax Christi  
D27 Women's Retreat Committee  
D28 First Reconciliation Catechist  
D29 First Reconciliation Aide  
D30 First Communion Catechist  
D31 First Communion Aide  
D32 ENDOW

### LITURGY

L01 Eucharistic Adoration  
L02 EMHC  
L03 J.O.Y. Communion To Home-bound, Hospital, Nursing Home  
L04 Money Counters  
L05 RCIA\_AC  
L06 RCIA\_AC Team  
L07 RCIA Adult Sponsor

L08 RCIA Team  
L09 Sacristan - Adults  
L10 Altar Linens  
L11 Altar Servers - Youth  
L12 Baptismal Garments  
L13 Lectors (8x/year)  
L14 Music - Adult Choir  
L15 Music - Cherub Choir (K-6)  
L16 Musicians (Variable)  
L17 Accompanists (Variable)  
L18 Sound System Operators (Monthly)  
L19 Wine Ministry (3x/year)  
L20 MC  
L21 Hospitality Team  
L22 Ushers - All Ages (2x/month)

### OUTREACH

O01 Bread Ministry  
O02 St. Elizabeth Pantry  
O03 Prayer Chain  
O04 Christmas Giving Tree

O05 Fair Trade Coffee Sales  
O06 Habitat For Humanity  
O07 Fr. Ed Judy House  
O08 St. Vincent De Paul  
O09 Lunch Bunch  
O10 Mobile Food Bank Of Rockies  
O11 Project Linus (Monthly)  
O12 Relay For Life (Annual Event)  
O13 Whole World Market (Annual Event)  
O14 Love Inc.  
O15 Catholic Charities Ambassador  
O16 Cancer Support Group  
O17 Grief Support Group  
O18 Helping Hands (Funeral Meals)  
O19 Prayer Shawl Ministry  
O20 Project Care: Meals In Time Of Illness  
O21 Stephen Ministry (50 Hr. Training +)  
O22 Retrouvaille  
O23 Theodora House

\* You will be contacted in a few days, regarding your ministry selection.

## MINISTRIES/ TALENTS

	Self	Spouse/Other	Child	Child	Child	Child	Child
With what ministry/ies will you be involved? (Use codes)							
Other skills/talents you can share (e.g. sewing, art)							