



Date: _____

Liturgy: 5:00 PM 9:00 AM 11:00 AM

Envelope # _____

Household Information

Address:			
	Street Address		Apartment/Unit #
	City	State	ZIP Code
Home Phone:	Unlisted <input type="checkbox"/>	Family E-mail Address:	

Head of the House-Personal Information

Full Name:					M <input type="checkbox"/>	Birth Date
	Last	First	Middle	Sex	F <input type="checkbox"/>	
Maiden Name:	Current Employer:		Position:			
Cell Phone:	Work Phone:	Emergency only <input type="checkbox"/>	Work E-mail Address:			
Religion:	Marital Status:		Married Date:			
Sacrament Received:	Baptism <input type="checkbox"/>	1 st . Communion <input type="checkbox"/>	1 st . Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>		

Spouse-Personal Information

Full Name:					M <input type="checkbox"/>	Birth Date
	Last	First	Middle	Sex	F <input type="checkbox"/>	
Maiden Name:	Current Employer:		Position:			
Cell Phone:	Work Phone:	Emergency only <input type="checkbox"/>	Work E-mail Address:			
Religion:	Marital Status:		Married Date:			
Sacrament Received:	Baptism <input type="checkbox"/>	1 st . Communion <input type="checkbox"/>	1 st . Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>		

Children/Dependents-Living at Home Information

First Child:					M <input type="checkbox"/>	Birth Date
	Last	First	Middle	Sex	F <input type="checkbox"/>	
Grade:	School Name/District:		Religion:			
Sacrament Received:	*Baptism <input type="checkbox"/>	1 st . Communion <input type="checkbox"/>	1 st . Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>		

Second Child:					M <input type="checkbox"/>	Birth Date
	Last	First	Middle	Sex	F <input type="checkbox"/>	
Grade:	School Name/District:		Religion:			
Sacrament Received:	*Baptism <input type="checkbox"/>	1 st . Communion <input type="checkbox"/>	1 st . Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>		

Third Child:					M <input type="checkbox"/>	Birth Date
	Last	First	Middle	Sex	F <input type="checkbox"/>	
Grade:	School Name/District:		Religion:			
Sacrament Received:	*Baptism <input type="checkbox"/>	1 st . Communion <input type="checkbox"/>	1 st . Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>		

Fourth Child:					M <input type="checkbox"/>	Birth Date
	Last	First	Middle	Sex	F <input type="checkbox"/>	
Grade:	School Name/District:		Religion:			
Sacrament Received:	*Baptism <input type="checkbox"/>	1 st . Communion <input type="checkbox"/>	1 st . Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>		

I give St. Patrick Catholic Church permission to use our photo for in the bulletin and welcoming display in the Social Hall. _____

Initial's

St. Patrick Catholic Church — New Parishioner Questionnaire

1. What are the leading factors that influenced you to join St. Patrick's?

- | | |
|---|--|
| <input type="checkbox"/> Sacraments (Baptism, Marriage, etc.) | <input type="checkbox"/> Deeper relationship with Christ |
| <input type="checkbox"/> Quality of education programs (Adult & Children) | <input type="checkbox"/> Genuine sense of community |
| <input type="checkbox"/> New to the area / Just moved | <input type="checkbox"/> Family/friends attend here |
| <input type="checkbox"/> Other: _____ | (Family / Friends: _____) |

2. Did you do some "church shopping" prior to choosing St. Patrick? Yes No

3. From a volunteer stand-point, I see myself becoming:

- Very involved Somewhat involved Not involved at all

4. How can we pray for you?



Questions, comments, notes: