Please indicate interests by family member name(s). Music & Liturgy: _____ Cantor____ Adult Choir Handbells Children's Choir Contemporary Music Ensemble Lector Children's Liturgy Eucharist Minister Usher Greeter Altar Server Decorating / Altar Society _Liturgy Planning____Other Christian Formation: _____Adult Faith______Faith Formation Catechist Faith Formation Aide School Volunteer Youth Ministry Marriage Preparation Team Vacation Bible School _Becoming Catholic/ RCIA____Other Service & Justice: Pastoral Visitor Nursing Home Pantry _____ Pro-Life Committee _____ Social Justice Committee _Parish Nursing_____ Ladies of Charity_____Bereavement St. Vincent de Paul Society Other Stewardship: _____ Development/Fund Raising ______Finance Council _Building & Properties Committee ______ Time & Talent Committee _Public Relations/Communications Office Help Other Community Life:______Welcome Committee _____Evangelization _____Sodality_____Holy Name Society_____Pastoral Council Ecumenical Activities Hispanic Committee

PARISH REGISTRATION FORM

St. Michael the Archangel Parish Community

10 Willow Avenue Baltimore, MD 21206

(410) 665-1054

Household Information --- Please Print Clearly

How would you like your household mail addressed?	(Example: M Ms. Mary D	۱r. & Mrs. John Smith, Mary & Jc oe, etc.)	hn Smith, John Smith & Mar	y Doe		
			Apart	ment	#	
Street Address						
City/State/Zip Code						
Mailing Address City/State/Zip Code						
Home Phone:		Work Phone:	Mobile Phone:			
Primary Email Address						
Is anyone a graduate	e of					
St. Michael's School? If	so, list					
name & graduation y	ear.					
Do you wish to use	ls i	t alright to publish	Would you like to receive			
contribution envelopes?	inf	ormation in parish	The Catholic Review?			
	listings/	directories/committees				
Yes No		Yes No	Yes N	lo		
Any members La		uages Spoken other	Do your children attend:			
require the		than English:	St. Michael School	Yes	No	
sacraments at			Pre-School	Yes	No	
home?			Faith Formation	Yes	No	

PC_

DATE:

FAMILY INFORMATION

Please make us aware of any special needs that you may have.

List all people living with the family. List children living at home from oldest to youngest Name Ex First, Middle, (Maiden) & Last	Salutation Mr. Mrs. Miss Ms. Dr. Etc.	Relationship to Head(s) of Household: Son/Daughter Parent In-law Etc.	Sex M F	Marital Status: Single Married - Catholic Married (not Catholic) Separated Widowed Divorced	Religion: Specify Denomination	Date of Birth: MM//DD//YYYY	Sacraments Received (List all that apply) B – Baptism E - Eucharist P – Penance/Confession C – Confirmation M – Married Catholic	Attend Mass: W – Weekly M – Monthly S – Seldom N Never	Grade Completed Or Degree:	Occupation or School Attending (& Current Grade)
Head of Household :										
Spouse:										