**SAINT MATTHEW ROMAN CATHOLIC CHURCH**

PARISH REGISTRATION FORM

Please do the best you can in completing ALL information so we can update our records to better serve you. Please print all information. When finished put in an envelope and drop in the offertory/offering basket, return to the church office or mail to Saint Matthew Church, 1105 Cameron Avenue, Tyrone, PA 16686. This information ***is strictly confidential*** for pastoral use only and will not be given out to unauthorized personnel.

Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Church Envelope # (church office will assign): \_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (if different from home): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

***Information regarding Head of Household***

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title (Mr. Mrs. Ms. Dr. etc.): \_\_\_\_\_\_\_\_

Maiden Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date and place of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship Status: ☐Single ☐ Married ☐ Remarried ☐Widowed ☐Divorced ☐Separated

***Sacraments received:***

BAPTISM Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRST COMMUNION Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONFIRMATION: Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MARRIAGE(S): Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was this a sacramental marriage within the Catholic Church? ☐ Yes ☐ No

If divorced or remarried was there an annulment granted? ☐ Yes ☐ No

If no Church Marriage, Date & Place of Marriage, performed by whom: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Information regarding Spouse***

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title (Mr. Mrs. Ms. Dr. etc.): \_\_\_\_\_\_\_\_

Maiden Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date and place of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship Status: ☐Single ☐ Married ☐ Remarried ☐Widowed ☐Divorced ☐Separated

***Sacraments received:***

BAPTISM Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRST COMMUNION Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONFIRMATION: Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MARRIAGE(S): Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_ Church & City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was this a sacramental marriage within the Catholic Church? ☐ Yes ☐ No

If divorced or remarried was there an annulment granted? ☐ Yes ☐ No

If no Church Marriage, Date & Place of Marriage & performed by whom: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Single Children Living in Household or away at School:*** (list below)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | NAME  Date & Place of Birth | Sex (M/F) | Current School &  Grade Attending | Religion | Baptism | First Communion | Confirmation |
| 1. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: |
| 2. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: |
| 3. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: |
| 4. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: |
| 5. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: |

***Grown Independent Children:*** (list below) (Note: This includes “adult children” those who are working or who have completed high school or college, regardless of residence. These should fill out their own membership form – either here at Saint Matthew parish or at the parish where they attend.)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | NAME  Date & Place of Birth | Sex (M/F) | Current Occupation | Religion | Baptism | First Communion | Confirmation | Marriage: |
| 1. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: | Date:  Church: |
| 2. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: | Date:  Church: |
| 3. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: | Date:  Church: |
| 4. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: | Date:  Church: |
| 5. |  |  |  |  | Date:  Church: | Date:  Church: | Date:  Church: | Date:  Church: |

How do you prefer supporting the Church financially?

☐ Electronic-Giving ☐ Envelopes/Monthly ☐ Envelopes/Weekly ☐ Cash ☐ None

***In which ministries would you be interested in sharing your talents?***

***Pastoral Ministries:***

☐ Parish Pastoral Council ☐ Parish Finance Council ☐ Spiritual Life Committee

☐ Parish/Social Life Committee ☐ Maintenance Committee ☐ Cemetery Committee

☐ Children & Youth Ministry ☐ Religious Education ☐ Adult Education

***Liturgical ministries and other ministries:***

☐ Altar Servers

☐ Extraordinary Ministers of Holy Communion

☐ Lector

☐ Usher

☐ Pre-Cana (Marriage) Sponsor Couple

☐ Music & Choir Ministry

☐ Good Samaritan - Ministry to the Poor and Sick

☐ Church Meals

☐ Church Cleaning

☐ Holy Rosary Leader Before Mass

☐ Funeral Luncheons

☐ Knights of Columbus

☐ Catholic Daughters of the Americas

☐ Ministry to the Sick, Elderly and Homebound

☐ Other interests or skills: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any particular needs? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_