## Our Lady of the Immaculate Conception Parish Membership Form

**Please Complete and Return to: Immaculate Conception Parish, 898 Centre Street, Freeland, PA 18224**

**Today’s Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| **(Please Print)** | **Member #1** | **Member #2** |
| **Title: (Circle one)** | Mr. Mrs. Miss. Ms. Dr. Rev. Other \_\_\_\_ | Mr. Mrs. Miss. Ms. Dr. Rev. Other \_\_\_\_\_\_ |
| **Name: (Last, First and**  **Maiden)** |  |  |
| **Gender: (Circle one)** | Male Female | Male Female |
| **Date of Birth:** | Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ | Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ |
| **Address With**  **City, State, Zip**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Years at present address:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| E-Mail Address: |  |  |
| Marital Status:  (Circle one) | M / S / D / W / Sep | M / S / D / W / Sep |
| **Date Married:** | Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ | Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ |
| **Home Phone:** | ( ) | ( ) |
| Cell Phone: | ( ) | ( ) |
| Occupation: |  |  |
| Religion: |  |  |
| **Baptized: (Circle One)** | Yes No | Yes No |
| First Communion: (Circle One) | Yes No | Yes No |
| Confirmation: (Circle One) | Yes No | Yes No |

Children Under the Age of 18 Who Live with You

**(Those 18 or over, please complete a separate registration)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Full Name** | **Sex** | **Birthdate** | **School** | **Baptized** | **1st Communion** | **Confirmation** |
| 1. |  |  |  | Yes No | Yes No | Yes No |
| 2. |  |  |  | Yes No | Yes No | Yes No |
| 3. |  |  |  | Yes No | Yes No | Yes No |
| 4. |  |  |  | Yes No | Yes No | Yes No |
| 5. |  |  |  | Yes No | Yes No | Yes No |

**Our Lady of the Immaculate Conception Parish**

**Parish Interest Form**

Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Primary Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My family is interested in volunteering for the following ministries:

Ministry Name of Family Member(s) Interested in Helping

Altar Server \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lector \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extraordinary Minister \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Altar and Rosary Society \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Messengers of Hope to Those in Need:

Forget-Me-Not Bags for the Elderly \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Backpacks for Kids in Need \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Warm Coats for Kids in Need \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Giving Tree for Anyone in Need \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hour of Kindness \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CCD Teacher or Aide \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Youth Group Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Youth Group Helper \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Helping at Fundraisers \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Baking for Bake Sales \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there any way our parish can better be of service to you:

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