

## Parishioner Registration/Update

PLEASE PRINT CLEARLY

### Family Information:

Last Name: \_\_\_\_\_

Email: \_\_\_\_\_

Would you like to be signed up for weekly emails?

Yes:  No:

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

*Please check if you DO NOT want your information published in the directory.*

Would you like to receive contribution envelopes?

If Yes, check:

Env # (Staff) \_\_\_\_\_

Would you like to contribute online?

If Yes, check:

If yes, please visit [ICCHAMPTON.WESHAREONLINE.ORG](http://ICCHAMPTON.WESHAREONLINE.ORG)

What Mass do you usually attend? (please check) 5:30 PM  8:30 AM  11:00 AM

Please Initial: \_\_\_\_\_ I understand that by registering with the church, I can be contacted by Immaculate Conception Church Staff, Ministry Leads, and the Pastoral Council.

### Parishioner Information:

(Please complete for each member of the family.)

#### Member #1

Full Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Nickname: \_\_\_\_\_ Role in Home: Please circle: head of household, spouse, parent, child, other

Gender: \_\_\_\_\_ Occupation/ Position: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ First Language: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate Phone: cell / work \_\_\_\_\_

Email: \_\_\_\_\_ Special Needs: \_\_\_\_\_

### Sacrament Information

Catholic: Yes:  No:

Baptism: Date: \_\_\_\_\_

Yes / No Location: \_\_\_\_\_

First Eucharist: Date: \_\_\_\_\_

Yes / No Location: \_\_\_\_\_

Confirmation: Date: \_\_\_\_\_

Yes / No Location: \_\_\_\_\_

Catholic Marriage: Date: \_\_\_\_\_

Yes / No Location: \_\_\_\_\_

### Ministry Interests & Talents and Gifts

What do you like to do? What are your favorite skills, strengths, talents, and/or hobbies?

What ministries would you like to learn about?

**Member #2**

Full Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
 Nickname: \_\_\_\_\_ Role in Home: Please circle: head of household, spouse, parent, child, other  
 Gender: \_\_\_\_\_ Occupation/  
 Position: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_  
 Ethnicity: \_\_\_\_\_ First Language: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Alternate Phone: cell / work \_\_\_\_\_  
 Email: \_\_\_\_\_ Special Needs: \_\_\_\_\_

**Sacrament Information**

Catholic: Yes:  No:   
 Baptism: Date: \_\_\_\_\_ First Eucharist: Date: \_\_\_\_\_  
 Yes / No Location: \_\_\_\_\_ Yes / No Location: \_\_\_\_\_  
 Confirmation: Date: \_\_\_\_\_ Catholic Marriage: Date: \_\_\_\_\_  
 Yes / No Location: \_\_\_\_\_ Yes / No Location: \_\_\_\_\_

**Ministry Interests & Talents and Gifts**

What do you like to do? What are your favorite skills, strengths, talents, and/or hobbies?

What ministries would you like to learn about?

**Member #3**

Full Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
 Nickname: \_\_\_\_\_ Role in Home: Please circle: head of household, spouse, parent, child, other  
 Gender: \_\_\_\_\_ Occupation/  
 Position: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_  
 Ethnicity: \_\_\_\_\_ First Language: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Alternate Phone: cell / work \_\_\_\_\_  
 Email: \_\_\_\_\_ Special Needs: \_\_\_\_\_

**Sacrament Information**

Catholic: Yes:  No:   
 Baptism: Date: \_\_\_\_\_ First Eucharist: Date: \_\_\_\_\_  
 Yes / No Location: \_\_\_\_\_ Yes / No Location: \_\_\_\_\_  
 Confirmation: Date: \_\_\_\_\_ Catholic Marriage: Date: \_\_\_\_\_  
 Yes / No Location: \_\_\_\_\_ Yes / No Location: \_\_\_\_\_

**Ministry Interests & Talents and Gifts**

What do you like to do? What are your favorite skills, strengths, talents, and/or hobbies?

What ministries would you like to learn about?

Please complete another sheet for additional family members.