

**ST. PAUL'S CHURCH  
PARISH REGISTRATION FORM**

FAMILY NAME (LAST NAME) \_\_\_\_\_

(PO Box) \_\_\_\_\_ (Street address) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Telephone Number \_\_\_\_\_ (home) \_\_\_\_\_ (work) E-Mail Address \_\_\_\_\_

Head of Household \_\_\_\_\_  
(Last Name) \_\_\_\_\_ (First Name) \_\_\_\_\_ (M.I.) \_\_\_\_\_ (Maiden Name) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Occupation, or if retired previous, occupation \_\_\_\_\_

Status \_\_\_\_\_ Married \_\_\_\_\_ Marriage recognized by the church \_\_\_\_\_ Sacraments Received  
 \_\_\_\_\_ Yes \_\_\_\_\_ No Baptism Yes No  
 \_\_\_\_\_ Yes \_\_\_\_\_ No Communion Yes No  
 \_\_\_\_\_ Single \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed Confirmation Yes No  
 Mass attendance: \_\_\_\_\_ Weekly \_\_\_\_\_ Monthly \_\_\_\_\_ Seasonal

Spouse \_\_\_\_\_  
(Last Name) \_\_\_\_\_ (First Name) \_\_\_\_\_ (M.I.) \_\_\_\_\_ (Maiden Name) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Occupation, or if retired previous, occupation \_\_\_\_\_

Sacraments Received  
 Baptism Yes No  
 Communion Yes No  
 Confirmation Yes No

Mass attendance: \_\_\_\_\_ Weekly \_\_\_\_\_ Monthly \_\_\_\_\_ Seasonal

OFFICE USE ONLY  
Last Name \_\_\_\_\_

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Please answer the following questions.

1. Do you receive offertory envelopes? \_\_\_\_\_ Yes, \_\_\_\_\_ No
2. If you do not receive offertory envelopes, would you like to receive them? \_\_\_\_\_ Yes, \_\_\_\_\_ No

**(LIST FAMILY MEMBERS LIVING AT YOUR HOME NOW)**

**CHILDREN STILL LIVING AT HOME:**

\_\_\_\_\_  
(LAST NAME) \_\_\_\_\_ (FIRST NAME) \_\_\_\_\_ (M.I.) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

School Attending \_\_\_\_\_  
 Grade in Religious Education (if applicable) \_\_\_\_\_  
 Handicap of any kind \_\_\_\_\_

Sacraments Received  
 Baptism Yes No  
 Communion Yes No  
 Confirmation Yes No

**CHILDREN STILL LIVING AT HOME:**

_____	_____	_____	DATE OF BIRTH _____/_____/_____
(LAST NAME)	(FIRST NAME)	(M.I.)	
School Attending _____			Sacraments Received
Grade in Religious Education (if applicable) _____			Baptism Yes No
Handicap of any kind _____			Communion Yes No
			Confirmation Yes No

_____	_____	_____	DATE OF BIRTH _____/_____/_____
(LAST NAME)	(FIRST NAME)	(M.I.)	
School Attending _____			Sacraments Received
Grade in Religious Education (if applicable) _____			Baptism Yes No
Handicap of any kind _____			Communion Yes No
			Confirmation Yes No

_____	_____	_____	DATE OF BIRTH _____/_____/_____
(LAST NAME)	(FIRST NAME)	(M.I.)	
School Attending _____			Sacraments Received
Grade in Religious Education (if applicable) _____			Baptism Yes No
Handicap of any kind _____			Communion Yes No
			Confirmation Yes No

Any other person(s) living with your household? \_\_\_\_\_

If anyone in your home, because of prolonged illness or being homebound, needs communion brought to them please call the rectory. If anyone is going into the hospital, make sure you tell the hospital that you are a parishioner of St. Paul's Parish in Delaware City so that when the parish priest visits the hospital (usually once a week), he will know you are there. Christiana Care calls us once a week to advise us of parishioners in the hospital. St. Francis Hospital does not notify us, so you should call the rectory. If you are having a scheduled procedure, it might be good to receive the Anointing of the Sick a few days before going in to the hospital. Call the rectory to schedule an anointing.

**(Use separate sheet for additional family members.)**

**Time and Talent:** Please share your Time and Talent with your parish. Indicate below where you can serve. Please indicate which member of the family is offering their services. If there is a choice, please underline your choice.

- |  |   |
|--|---|
| _____ Usher – 5pm or 9am   | _____ Church Cleaner (once a month)   |
| _____ Lector – 5pm or 9am  | _____ Religious Ed. Teacher / Substitute / Aide   |
| _____ Cantor – 5pm or 9am  | _____ Pro-Life  |
| _____ Keyboard/Piano/Organist<br>Other Instruments                                   | _____ Fund raising (such as flea markets/soup sales, etc.)  |
| _____ Altar Server   | _____ Decorators for Church and grounds   |
| _____ Maintenance/handyman/<br>tree work/carpentry/<br>electric, plumbing, gardening | _____ RCIA (Rite of Christian Initiation of Adults)<br>(to lead adults & children who have been away from the church or joining the church) |

DATE \_\_\_\_\_

**Please Note: All information on this form, except for the Volunteerism, will be kept confidential.**