

Date _____

Envelope # _____

**OUR LADY CONSOLATA PARISH
REGISTRATION FORM
4618 SOUTH ST., P. O. BOX 139, GAGETOWN, MI 48735 – PHONE 989-665-1027**

Would you like to receive parish communication-mail or email? Yes No

Site of: St. Pancratius _____ Holy Family _____ St. Agatha _____ St. Michael _____

Last Name _____ First _____ Middle _____

Maiden Name (if applicable) _____ Prior Parish _____

Address _____

City _____ State _____ Zip Code _____

Seasonal Address _____

Home Phone _____ Cell Phone _____

Religion _____ Date of Birth _____ Place _____

Occupation _____ E-mail Address _____

Gender: Male Female

Marital Status: Single Married Widowed Separated Divorced

Catholic Marriage Other Religious Marriage Civil Marriage

Sacraments Received: Baptism Confirmation Communion Reconciliation Marriage

Spouse/Other Adult

Last Name _____ First _____ Middle _____

Maiden Name (if applicable) _____ Prior Parish _____

Address _____

City _____ State _____ Zip Code _____

Seasonal Address _____

Home Phone _____ Cell Phone _____

Religion _____ Date of Birth _____ Place _____

Occupation _____ E-mail Address _____

Gender: Male Female

Marital Status: Single Married Widowed Separated Divorced

Catholic Marriage Other Religious Marriage Civil Marriage

Sacraments Received: Baptism Confirmation Communion Reconciliation Marriage

Children at home:

Child 1

Last Name _____ First _____ Middle _____

Relation: Child Stepchild Grandchild Other _____

Grade _____ Gender: M F

Religion _____ Date of Birth _____ Place _____

Sacraments Received: Baptism Confirmation Communion Reconciliation

Child 2

Last Name _____ First _____ Middle _____

Relation: Child Stepchild Grandchild Other _____

Grade _____ Gender: M F

Religion _____ Date of Birth _____ Place _____

Sacraments Received: Baptism Confirmation Communion Reconciliation

Child 3

Last Name _____ First _____ Middle _____

Relation: Child Stepchild Grandchild Other _____

Grade _____ Gender: M F

Religion _____ Date of Birth _____ Place _____

Sacraments Received: Baptism Confirmation Communion Reconciliation

Child 4

Last Name _____ First _____ Middle _____

Relation: Child Stepchild Grandchild Other _____

Grade _____ Gender: M F

Religion _____ Date of Birth _____ Place _____

Sacraments Received: Baptism Confirmation Communion Reconciliation

Children not at home: _____

OUR LADY CONSOLATA VOLUNTEER AND TALENT OPPORTUNITIES

PARISH MINISTRIES (Please indicate: **C=Current** **I=Interested**)

- | | |
|--|--|
| <input type="checkbox"/> Eucharistic Minister of Holy Communion | <input type="checkbox"/> Parish Council |
| <input type="checkbox"/> Lector | <input type="checkbox"/> Finance Council |
| <input type="checkbox"/> Altar Server | <input type="checkbox"/> Worship Commission |
| <input type="checkbox"/> Usher | <input type="checkbox"/> Christian Service |
| <input type="checkbox"/> Choir/Cantor | <input type="checkbox"/> Evangelization Team |
| <input type="checkbox"/> Faith Formation Teacher | <input type="checkbox"/> Cemetery Commission |
| <input type="checkbox"/> Minister of the Eucharist to the Homebound/Sick | <input type="checkbox"/> Youth Group |
| <input type="checkbox"/> Women's Groups | <input type="checkbox"/> Funeral Luncheons |
| <input type="checkbox"/> Knights of Columbus | <input type="checkbox"/> Money Counters |
| <input type="checkbox"/> Sacristan | <input type="checkbox"/> Food Pantry |
| <input type="checkbox"/> Greeter | <input type="checkbox"/> Prayer Chain |
| <input type="checkbox"/> Church Decorators | <input type="checkbox"/> Art and Environment |
| <input type="checkbox"/> Gardeners | <input type="checkbox"/> Other |

Any areas of concern, programs you would like to have offered, or things you may need help with.

Is there any special intention for which you would like us to pray for?

STEWARDSHIP

Tithing reflects the commitment your family has to the church and your prayerful discernment of giving back to God. Why do we need to use envelopes? Envelopes are instruments to help you in your stewardship accountability. They also allow our bookkeepers to be more accurate in their accounting ledgers. This system is voluntary. If you do not use envelopes or personal checks, we will not be able to certify your charitable contributions for your income tax records.

Would you like to receive contribution envelopes? Yes No