



Saint Richard Roman Catholic Church

Impassioned to know, love, and follow Christ day by day

NEW MEMBER REGISTRATION FORM

Confidential Information to Serve the Needs of Members

Dear Friend in Christ,

Welcome to the St. Richard Parish family. Thank you for choosing to be a part of our family.

Please complete and return this new member registration form and return to the Parish Office. We are asking for this information so that we might meet your particular needs and be able to better minister to you and your family. This information will be held in the strictest confidence for pastoral use only.

Please provide as much information as you are able, beginning with your family information followed by information for individual members of your family. If you should need additional help or have any questions, please do not hesitate to contact the parish office and we will be glad to assist you.

I look forward to getting to know you as new members of our parish.

May God Bless you and fill you with joy.

In Christ's Love,

Reverend Robert J. Vular, Pastor

Saint Richard Parish

Family Registration

3841 Dickey Rd, Gibsonia, PA, 15044 724-444-1971

Office Use Only

Reg. Date _____

Entered by _____
(Initials)

Envelope # _____

LTR _____ CC _____

GENERAL INFORMATION

FAMILY NAME: _____

MAILING NAME (i.e. Mr. &Mrs. John Doe): _____

ADDRESS: _____

HOME PHONE: _____

EMERG. CONTACT: _____

EMERG. PHONE: _____

CITY

STATE

ZIP CODE

MARRIAGE STATUS: _____

If married, please complete the following:

Date of Marriage: _____

Is your marriage recognized by the Catholic Church: Yes No

Name of Church: _____

City and State: _____

INDIVIDUAL INFORMATION

HEAD OF HOUSEHOLD

FIRST NAME: _____ MIDDLE NAME: _____ NICK NAME: _____ LAST NAME: _____
(If different from FAMILY NAME)

DATE OF BIRTH: _____ GENDER: M / F RELIGION: _____ MAIDEN NAME: _____

EMPLOYER: _____ OCCUPATION: _____ WORK PHONE: _____

EMAIL ADDRESS: _____ CELL PHONE: _____

SACRAMENTS: _____ DATE OF BAPTISM: _____

BAPTIZED: Y / N CHURCH: _____ CITY AND STATE: _____

EUCCHARIST: Y / N CHURCH: _____ CITY AND STATE: _____

CONFIRMED: Y / N CHURCH: _____ CITY AND STATE: _____

SPOUSE

FIRST NAME: _____ MIDDLE NAME: _____ NICK NAME: _____ LAST NAME: _____
(If different from FAMILY NAME)

DATE OF BIRTH: _____ GENDER: M / F RELIGION: _____ MAIDEN NAME: _____

EMPLOYER: _____ OCCUPATION: _____ WORK PHONE: _____

EMAIL ADDRESS: _____ CELL PHONE: _____

SACRAMENTS: _____ DATE OF BAPTISM: _____

BAPTIZED: Y / N CHURCH: _____ CITY AND STATE: _____

EUCCHARIST: Y / N CHURCH: _____ CITY AND STATE: _____

CONFIRMED: Y / N CHURCH: _____ CITY AND STATE: _____

CHILDREN/OTHERS LIVING IN HOME

(Please do not list children over 21 yrs. unless they are still dependent children—Children over 21 yrs. should register separately even if living in home)

1. FAMILY RELATIONSHIP: _____

FIRST NAME: _____ MIDDLE NAME: _____ NICK NAME: _____ LAST NAME: _____
(If different from FAMILY NAME)

DATE OF BIRTH: _____ GENDER: M / F RELIGION: _____ RELIGIOUS EDUCATION GRADE: _____

SCHOOL GRADE: _____ SCHOOL ATTENDING: _____ (If completed during the summer, please list which grade child is entering)

SACRAMENTS: _____ DATE OF BAPTISM: _____

BAPTIZED: Y / N CHURCH: _____ CITY AND STATE: _____

EUCCHARIST: Y / N CHURCH: _____ CITY AND STATE: _____

CONFIRMED: Y / N CHURCH: _____ CITY AND STATE: _____

2. FAMILY RELATIONSHIP: _____

FIRST NAME: _____ MIDDLE NAME: _____ NICK NAME: _____ LAST NAME: _____
(If different from FAMILY NAME)

DATE OF BIRTH: _____ GENDER: M / F RELIGION: _____ RELIGIOUS EDUCATION GRADE: _____

SCHOOL GRADE: _____ SCHOOL ATTENDING: _____ (If completed during the summer, please list which grade child is entering)

SACRAMENTS: _____ DATE OF BAPTISM: _____

BAPTIZED: Y / N CHURCH: _____ CITY AND STATE: _____

EUCCHARIST: Y / N CHURCH: _____ CITY AND STATE: _____

CONFIRMED: Y / N CHURCH: _____ CITY AND STATE: _____

3. FAMILY RELATIONSHIP: _____

FIRST NAME: _____ MIDDLE NAME: _____ NICK NAME: _____ LAST NAME: _____
(If different from FAMILY NAME)

DATE OF BIRTH: _____ GENDER: M / F RELIGION: _____ RELIGIOUS EDUCATION GRADE: _____

SCHOOL GRADE: _____ SCHOOL ATTENDING: _____ (If completed during the summer, please list which grade child is entering)

SACRAMENTS: _____ DATE OF BAPTISM: _____

BAPTIZED: Y / N CHURCH: _____ CITY AND STATE: _____

EUCCHARIST: Y / N CHURCH: _____ CITY AND STATE: _____

CONFIRMED: Y / N CHURCH: _____ CITY AND STATE: _____

4. FAMILY RELATIONSHIP: _____

FIRST NAME: _____ MIDDLE NAME: _____ NICK NAME: _____ LAST NAME: _____
(If different from FAMILY NAME)

DATE OF BIRTH: _____ GENDER: M / F RELIGION: _____ RELIGIOUS EDUCATION GRADE: _____

SCHOOL GRADE: _____ SCHOOL ATTENDING: _____ (If completed during the summer, please list which grade child is entering)

SACRAMENTS: _____ DATE OF BAPTISM: _____

BAPTIZED: Y / N CHURCH: _____ CITY AND STATE: _____

EUCCHARIST: Y / N CHURCH: _____ CITY AND STATE: _____

CONFIRMED: Y / N CHURCH: _____ CITY AND STATE: _____

*NOTE: IF YOU NEED TO ADD ADDITIONAL CHILDREN, PLEASE USE A SECOND FORM.