



# Our Lady of Mercy Parish Registration Form

Date: \_\_\_/\_\_\_/\_\_\_ ID# \_\_\_\_\_  
office use only

Family Name: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Would you like:  Offertory Envelopes  Online Giving  None

First Name	Last Name <small>(Maiden name of wife)</small>	Date of Birth	Relationship <small>(Husband, wife, child, adult)</small>	Marital Status <small>(Single, Married, Divorced, Widowed)</small>	Occupation	Religion <small>(if not Catholic)</small>	Baptism <small>(Y/N)</small>	Confirmation <small>(Y/N)</small>	Communion <small>(Y/N)</small>

Does anyone in your family need to have communion brought to them at home? \_\_\_\_\_

Are there any family circumstances you would like us to be aware of? \_\_\_\_\_

*We come together to worship, learn and spread the message of Jesus: to share our gifts and talents with one another and those in our greater community...*

*Our Lady of Mercy Mission Statement*

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

Please check any ministries you would like to participate in:

<b>Parish Ministries</b>
Eucharistic Minister (confirmed Teens welcomed)
Lector (confirmed Teens welcomed)
Altar Server
Greeter/Usher
Music Ministry:
Cantor
Folk Group
Teen Group
Children's Choir
Organ/Piano
Guitar
Other Instrument
Comfort Ministry (Ministry to the bereaved)
Health Ministry
Prayer/Shawl Ministry/Yarn Therapy
Ministry to the Home Bound
Welcoming Ministry
<b>Religious Education/CCD</b>
Interested in participating in the program (someone will call you)

<b>Parish Organizations</b>
Life Matters
Social Committee
Ladies Guild
Knights of Columbus
Moms and Tots
<b>Parish Spirituality</b>
RCIA/RCIC
Adult Faith Formation
Women of Faith
Rosary
<b>Skills You Would Like to Share with Us</b>
Art work/Decorating
General Maintenance (Carpentry, Electrical, Plumbing, etc.)
Computer related
Professional (i.e. Medical Fields)

What are you looking forward to as you join Our Lady of Mercy Parish?

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