



ST. MICHAEL'S CHURCH

800 Ocean Avenue | Long Branch, NJ 07740 | 732-222-8080

PARISH REGISTRATION FORM

Please Print Clearly

1. HOUSEHOLD INFORMATION

Today's Date: _____

Family Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Primary Email Address: _____

2. FAMILY INFORMATION

Male

Female

Full Name:		
Date of Birth:		
Cell Phone:		
Email:		
Occupation:		
Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widower	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow
Marriage Location:	Church	City State
Are you Catholic?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Convert	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Convert
Other Religion:		
Sacraments:	<input type="checkbox"/> Baptized <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation	<input type="checkbox"/> Baptized <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation

3. GIVING REFERENCE

What is your preferred method of contributing?

- Envelopes Faith Direct (Online Giving) I prefer to contribute another way.

If interested, please visit www.stmichaelnj.com for instructions on registering for Faith Direct online giving.

4. CHILDREN/OTHER HOUSEHOLD MEMBERS

Please list any children in your home under age 21 (including those away at school). Children out of your household or above age 21 should register separately.

Name	Gender	Date of Birth	Sacraments
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptized <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptized <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptized <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptized <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation
	<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptized <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation

5. SPECIAL NEEDS

Are there members of this household that require special needs or assistance?

- Homebound? Need to receive Sacraments at home?

Other Information: _____

6. PARISH INTEREST & INVOLVEMENT

Please write the name or initials of involved or interested family members:

Area of Interest	Current Member?	Prior Member?	Interested?
<i>Altar Rosary Society</i>			
<i>Altar Servers</i>			
<i>Bible Study</i>			
<i>Collection Counters</i>			
<i>Eucharistic Minister</i>			
<i>Hospitality</i>			
<i>Lectors</i>			
<i>Music Ministry</i>			
<i>Paduan Ministry</i>			
<i>Pathway to Heal: Divorced, Widowed, & Separated</i>			
<i>RCIA</i>			
<i>Religious Education</i>			
<i>Small Groups</i>			
<i>Stephen Ministry</i>			
<i>Ushers</i>			
<i>Youth Group (grades 5-12)</i>			

If you choose to participate in any of the above ministries, please be aware of the following Diocesan Safe Environment Program requirements for volunteer compliance:



- Virtus Training – a three hour presentation
- Criminal History Background Check
- Diocese of Trenton Volunteer Code of Conduct
- Volunteer application
- Display the diocesan issued ID badge at all ministry activities