

# Parish Registration

I wish to register at: (check one)

**OUR LADY OF MT. CARMEL-EMMETT** \_\_\_\_\_  
810-384-1338

**SACRED HEART-YALE** \_\_\_\_\_  
810-387-9800

**ST. JOHN'S-ALLENTON** \_\_\_\_\_  
810-669-1029

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

Envelope # \_\_\_\_\_  
(Parish Assigned)

Street Address: \_\_\_\_\_

Office use only **Registration Date:**  
\_\_\_\_\_

City/ State/ Zip: \_\_\_\_\_

If you wish to enroll in On-Line Giving, please go to the website for the church in which you are registering:

[Olmcemmet.churchgiving.com](http://Olmcemmet.churchgiving.com)

[Olmcyale.churchgiving.com](http://Olmcyale.churchgiving.com)

[Osvhub.com/st-john-allenton/giving/funds](http://Osvhub.com/st-john-allenton/giving/funds)

## Adult Members of Household

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

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

Date of Birth \_\_\_\_\_

Maiden Name \_\_\_\_\_

City/State/of Birth \_\_\_\_\_

Date of Birth \_\_\_\_\_

Phone: \_\_\_\_\_

City/State/of Birth \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Catholic  Yes  No

If no, specify religion or "none" \_\_\_\_\_

Catholic  Yes  No

If no, specify religion or "none" \_\_\_\_\_

Marital Status: Single { } Married { }

Divorced { } Marriage Annulled { } Widowed { }

If married, were you married in a Catholic Church?  Yes  No If yes, which church?  
\_\_\_\_\_

Marital Status: Single { } Married { }

Divorced { } Marriage Annulled { } Widowed { }

If married, were you married in a Catholic Church?  Yes  No If yes, which Church?  
\_\_\_\_\_

Wedding Date: \_\_\_\_\_

Wedding Date: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Talent(s): \_\_\_\_\_

Talent(s): \_\_\_\_\_

### Sacraments Received / When / Where

Baptism \_\_\_\_\_

Eucharist Date \_\_\_\_\_

Confirmation Date \_\_\_\_\_

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Baptism \_\_\_\_\_

Eucharist Date \_\_\_\_\_

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Last Parish [*Please include Name/City/State*] \_\_\_\_\_

Are there other adults living in your household (mother/father/in-laws/brother/sisters?) \_\_\_\_\_

If yes, if members, please list them separately -OR- please have them register on a separate form.

Please List Non-Adult Children Below - Oldest to Youngest

Full Name: \_\_\_\_\_  
 Male  Female

Lives at home  Lives with other parent   
 Away at school   
 Date of Birth: \_\_\_\_\_  
 City/State of Birth: \_\_\_\_\_

*Would like information on*  
 Religious Ed  Altar Serving  Youth Group   
**Sacraments Received & Where & When**  
 Baptism \_\_\_\_\_  
 \_\_\_\_\_  
 First Penance \_\_\_\_\_  
 \_\_\_\_\_  
 Eucharist \_\_\_\_\_  
 \_\_\_\_\_  
 Confirmation \_\_\_\_\_  
 \_\_\_\_\_

Full Name: \_\_\_\_\_  
 Male  Female

Lives at home  Lives with other parent   
 Away at school   
 Date of Birth: \_\_\_\_\_  
 City/State of Birth: \_\_\_\_\_

*Would like information on*  
 Religious Ed  Altar Serving  Youth Group   
**Sacraments Received & Where & When**  
 Baptism \_\_\_\_\_  
 \_\_\_\_\_  
 First Penance \_\_\_\_\_  
 \_\_\_\_\_  
 Eucharist \_\_\_\_\_  
 \_\_\_\_\_  
 Confirmation \_\_\_\_\_  
 \_\_\_\_\_

Full Name: \_\_\_\_\_  
 Male  Female

Lives at home  Lives with other parent   
 Away at school   
 Date of Birth: \_\_\_\_\_  
 City/State of Birth: \_\_\_\_\_

*Would like information on*  
 Religious Ed  Altar Serving  Youth Group   
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 First Penance \_\_\_\_\_  
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 Eucharist \_\_\_\_\_  
 \_\_\_\_\_  
 Confirmation \_\_\_\_\_  
 \_\_\_\_\_

Full Name: \_\_\_\_\_  
 Male  Female

Lives at home  Lives with other parent   
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 Date of Birth: \_\_\_\_\_  
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 \_\_\_\_\_  
 Confirmation \_\_\_\_\_  
 \_\_\_\_\_

*If you need more spaces for children please use an additional form*

**I would like more information about the following activities**  
*Please circle any that apply and indicate who in the family is interested.*  
*Someone from the parish organization will contact you.*

**Liturgical Ministry**

- Choir
- Eucharistic Minister
- Lector
- Greeter
- Usher

**Parish Ministries**

- Giving Tree Helpers
- Christian Service
- Funeral Luncheons
- Church Grounds/Cemetery Care
- Other: \_\_\_\_\_

**Leadership**

- Parish Council

**ARE THERE MEMBERS OF YOUR HOUSEHOLD WHO WOULD LIKE...**

- TO BE VISITED BY A PRIEST? \_\_\_\_\_ HOUSEHOLD MEMBER'S NAME(S) \_\_\_\_\_
- HOMEBOUND COMMUNION CALLS? \_\_\_\_\_ HOUSEHOLD MEMBER'S NAME(S) \_\_\_\_\_
- TO BECOME CATHOLIC? \_\_\_\_\_ HOUSEHOLD MEMBER'S NAME(S) \_\_\_\_\_