



# ST. ELIZABETH ANN SETON PARISH – MEMBER REGISTRATION FORM

240 South 6<sup>th</sup> Street, Richmond, IN-47374 | Ph: 765-962-3902 | Fax: 765-966-0820 | www.setoncatholics.org

ENVELOPE/ID:

Last Name of Family: \_\_\_\_\_ Head of Household: \_\_\_\_\_ Spouse: \_\_\_\_\_

Address: \_\_\_\_\_ Language: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Marital Status: [Sing] [Mar] [Wid] [Div]

## MEMBER INFORMATION (ADULT)

NAME: FIRST–MIDDLE–LAST	SEX	BIRTH DATE	OCCUPATION	EMPLOYER	WORK PHONE
<u>1</u>					
<u>2</u>					

## MEMBER INFORMATION (CHILDREN)

NAME: FIRST–MIDDLE–LAST	SEX	BIRTH DATE	SCHOOL/COLLEGE	GRADE/YEAR
<u>1</u>				
<u>2</u>				
<u>3</u>				
<u>4</u>				
<u>5</u>				
<u>6</u>				
<u>7</u>				

## SACRAMENT INFORMATION

[Give approximate date/year/place of sacraments received]

FIRST NAME OF MEMBER	BAPTISM	WHERE BAPTISED	RELIGION	HOLY COMMUNION	CONFIRMATION	MARRIAGE
<u>1</u>						
<u>2</u>						
<u>3</u>						
<u>4</u>						
<u>5</u>						
<u>6</u>						
<u>7</u>						
<u>8</u>						
<u>9</u>						

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Sign up for online giving? \_\_\_\_\_ Enroll your children in Rel. Ed? \_\_\_\_\_

Enroll your kids at Seton Schools? \_\_\_\_\_ Your Former Parish: \_\_\_\_\_

Would you like to serve our parish? Lector  Communion Minister  Server  Adoration  Youth Ministry  Rel. Ed  Volunteer  Other