



# Church of St. Albert

The Catholic Church in the Heart of Albertville

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11400 57th Street NE | P O Box 127 | Albertville, MN 55301

Phone: 763-497-2474 | Fax: 763-497-7678

Email: [stalbertmn@gmail.com](mailto:stalbertmn@gmail.com) | Website: [www.churchofstalbert.org](http://www.churchofstalbert.org)

## Welcome!

On behalf of the staff and the entire family of St. Albert, we welcome you as a member of St. Albert. Whether you have grown up in this community or are new to the area, we are grateful that you are here and we look forward to getting to know you better.

By completing the following **Member Registration Form** and mailing or delivering it to the above address or dropping it in the collection basket at Mass, you will be added as a Registered Member.

If you are new to the area or are coming back, you will be invited to attend an upcoming Welcome Mass and Tour. This will give you the opportunity to meet others who have joined the parish and put you in touch with parishioners who will make you aware of the programs and ministries St. Albert has to offer, and in which we hope you will participate.

St. Albert was founded on the belief that YOU are integral and important to the life of the Church. Therefore, we encourage and invite you to become active in any of the committees or organizations, which could benefit from your unique talents. Above all, we encourage your active presence at our weekend celebration of the Eucharist. This is an especially important time when the whole community of the faithful gathers to be challenged by the Word of God in Scripture. We are fed and strengthened by the Body and Blood of Christ, and encouraged by the love and support of our brothers and sisters in Christ.

We welcome you and look forward to seeing you as vital member of our community.

Sincerely in Christ,

## Welcome Committee

Jacci Wacker	763-497-4547
Jackie Fladung	763-497-0760
Mary Haehn	612-845-4589
Pam Lindenfelser	763-295-2756
Marlene Zachman	763-497-2967



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## Member Registration Form

In order to help better serve you, please provide us the following information. (Please Print)  
One form per family or single adult (age 18 or older and out of high school)

Last Name of Family: \_\_\_\_\_ Registration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_  
Street City, State, Zip

Primary Phone #: \_\_\_\_\_  Landline Phone  Cell Phone

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

Family Status  Single  Married  Separated  Divorced  Single Parent  Widowed

If Married: \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_\_  
Date Parish, City & State

If adult (18 and older) living at home, list parent(s) name: \_\_\_\_\_

Date/Parish/City

Adult Full Name		<input type="checkbox"/> Baptism	
Date of Birth		<input type="checkbox"/> Penance	
Occupation		<input type="checkbox"/> Communion	
Religion		<input type="checkbox"/> Confirmation	
Personal Cell Phone		Volunteer Interests	
Personal Email			

Date/Parish/City

Adult Full Name (also Maiden Name)		<input type="checkbox"/> Baptism	
Date of Birth		<input type="checkbox"/> Penance	
Occupation		<input type="checkbox"/> Communion	
Religion		<input type="checkbox"/> Confirmation	
Personal Cell Phone		Volunteer Interests	
Personal Email			

Date/Parish/City

Child Full Name		<input type="checkbox"/> Baptism	
Date of Birth		<input type="checkbox"/> Penance	
Gender		<input type="checkbox"/> Communion	
Religion		<input type="checkbox"/> Confirmation	
Grade		Volunteer Interests	
School			

For additional family members, please use reverse side. List only those living in your household.

Date/Parish/City

<b>Child Full Name</b>		<input type="checkbox"/> <b>Baptism</b>	
<b>Date of Birth</b>		<input type="checkbox"/> <b>Penance</b>	
<b>Gender</b>		<input type="checkbox"/> <b>Communion</b>	
<b>Religion</b>		<input type="checkbox"/> <b>Confirmation</b>	
<b>Grade</b>		<b>Volunteer Interests</b>	
<b>School</b>			

Date/Parish/City

<b>Child Full Name</b>		<input type="checkbox"/> <b>Baptism</b>	
<b>Date of Birth</b>		<input type="checkbox"/> <b>Penance</b>	
<b>Gender</b>		<input type="checkbox"/> <b>Communion</b>	
<b>Religion</b>		<input type="checkbox"/> <b>Confirmation</b>	
<b>Grade</b>		<b>Volunteer Interests</b>	
<b>School</b>			

Date/Parish/City

<b>Child Full Name</b>		<input type="checkbox"/> <b>Baptism</b>	
<b>Date of Birth</b>		<input type="checkbox"/> <b>Penance</b>	
<b>Gender</b>		<input type="checkbox"/> <b>Communion</b>	
<b>Religion</b>		<input type="checkbox"/> <b>Confirmation</b>	
<b>Grade</b>		<b>Volunteer Interests</b>	
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Date/Parish/City

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Date/Parish/City

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<b>Date of Birth</b>		<input type="checkbox"/> <b>Penance</b>	
<b>Gender</b>		<input type="checkbox"/> <b>Communion</b>	
<b>Religion</b>		<input type="checkbox"/> <b>Confirmation</b>	
<b>Grade</b>		<b>Volunteer Interests</b>	
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Date/Parish/City

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<b>Date of Birth</b>		<input type="checkbox"/> <b>Penance</b>	
<b>Gender</b>		<input type="checkbox"/> <b>Communion</b>	
<b>Religion</b>		<input type="checkbox"/> <b>Confirmation</b>	
<b>Grade</b>		<b>Volunteer Interests</b>	
<b>School</b>			

**Young Adult:** For any child/young adult, (18 or older) residing elsewhere and wanting to be a member of the Church of St. Albert, they should also complete and return a Member Registration Form.

**Please return to:** Church of St. Albert, 11400 57<sup>th</sup> St. NE, P O Box 127, Albertville, MN 55301

**To contact the Parish Office:** Call 763-497-2474 or Email: [stalbertmn@gmail.com](mailto:stalbertmn@gmail.com)

Parish Website Address: <http://www.churchofstalbert.org>