

Registering as a Parishioner at Sacred

We are happy that you have chosen to register in Sacred Heart Parish. Sacred Heart is a wonderful rich and diverse community of people with a history that goes back well over one hundred years. People come here each week from the Bellingham area and beyond, and in doing so they build a vibrant community of faith. We trust that in registering at Sacred Heart, you are committing yourself to being here for Sunday Mass and to taking an active part in the parish. Sunday Mass is so important for us: we need the Eucharist and we need the support of the community in order to live our Christian lives during the week. **When you register at Sacred Heart, you are making a serious commitment to support the life of the parish with your presence and, to the extent you are able, your time and treasure as well.**



Parishioner Commitment

We hope you will make these goals your own as you register at Sacred Heart Parish.

- ◆ We commit ourselves to full, conscious, and active participation in the Sunday Eucharist each week, because we know that the Eucharist is the source and summit of our Christian life.
- ◆ We commit ourselves to educate our children in the Catholic faith, to welcome new and returning Catholics into the community, and above all, to live lives of continuing conversion, constantly deepening our knowledge of our faith and tradition.
- ◆ We commit ourselves to serve one another in love, to reach out to the poor in the name of Christ, and to be a voice in the community against poverty, violence and injustice.

*Please complete **both sides** of the registration card below, detach at the dotted line and drop in the offering basket or return to the Parish Office.*

Sacred Heart Catholic Church

Date _____

1110 14th Street 360-734-2850
Bellingham, WA 98225

PARISH REGISTRATION FORM

Please print clearly

Mr. Miss Mrs. Ms. Dr. (Please circle one)	PRIMARY REGISTRANT Last				First	Middle
Home Address (include apt. #)		City	State	Zip	Home Telephone Cellular Phone	
Email Address		Occupation / Company			Business Telephone	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate	Language(s) spoken at home	Religion _____ Sacraments received: <input type="checkbox"/> Baptism <input type="checkbox"/> Confession <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Married in Catholic Church			
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Engaged <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed						
Mr. Miss Mrs. Ms. Dr. (Please circle one)	SPOUSE / SECOND REGISTRANT Last				First	Middle
Email Address		Occupation / Company			Business Telephone Cellular Phone	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate	Language(s) spoken at home	Religion _____ Sacraments received: <input type="checkbox"/> Baptism <input type="checkbox"/> Confession <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Married in Catholic Church			
Are you registered at another parish in the Archdiocese of Seattle? If so, which one?						FOR OFFICE USE ONLY

PLEASE TURN OVER AND COMPLETE THE REVERSE SIDE →

CHILD Last		First		Middle	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate	Religion	Name of school and grade (if attending)		
Sacraments received (check all that apply): <input type="checkbox"/> Baptism <input type="checkbox"/> Confession <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation					

CHILD Last		First		Middle	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate	Religion	Name of school and grade (if attending)		
Sacraments received (check all that apply): <input type="checkbox"/> Baptism <input type="checkbox"/> Confession <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation					

CHILD Last		First		Middle	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate	Religion	Name of school and grade (if attending)		
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CHILD Last		First		Middle	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate	Religion	Name of school and grade (if attending)		
Sacraments received (check all that apply): <input type="checkbox"/> Baptism <input type="checkbox"/> Confession <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation					

PLEASE SEND INFORMATION ABOUT: <input type="checkbox"/> Baptism <input type="checkbox"/> RCIA (Rite of Christian Initiation for Adults) <input type="checkbox"/> Wedding at Sacred Heart <input type="checkbox"/> Children's Faith Formation					
I'D LIKE TO VOLUNTEER! Call me to talk about: <input type="checkbox"/> Children's Faith Formation <input type="checkbox"/> Hospitality <input type="checkbox"/> Outreach Ministry <input type="checkbox"/> Music Ministry <input type="checkbox"/> Building & Grounds <input type="checkbox"/> Other _____					
I'm ready to make a STEWARDSHIP GIVING Pledge to Sacred Heart. I'd like to give \$_____ <input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> please send me information about direct deposit					