



St. Peter Catholic Church
 125 Barr Steet
 Lexington, KY 40507

FAMILY REGISTRATION FORM

FAMILY INFORMATION

Head of Household:

Title: Mr. Mrs. Ms. Miss Dr.

Last Name: _____

First Name: _____

Middle Name: _____

Street Address: _____

City/State: _____ ZIP Code: _____

Spouse/Significant Other:

Title: Mr. Mrs. Ms. Miss Dr.

Last Name: _____

First Name: _____

Middle Name: _____

Phone Numbers:	Description	Unlisted?	
		Yes	No
_____	Home, Cell-Husband, Cell-Wife, Work-Husband, Work-Wife, Other	Yes	No
_____	Home, Cell-Husband, Cell-Wife, Work-Husband, Work-Wife, Other	Yes	No
_____	Home, Cell-Husband, Cell-Wife, Work-Husband, Work-Wife, Other	Yes	No

E-Mail: _____ Personal-Husband, Personal-Wife, Work-Husband, Work-Wife, Other

E-Mail: _____ Personal-Husband, Personal-Wife, Work-Husband, Work-Wife, Other

List of other family members in the home:

_____	Name	_____	Relationship
_____	Name	_____	Relationship
_____	Name	_____	Relationship
_____	Name	_____	Relationship
_____	Name	_____	Relationship
_____	Name	_____	Relationship

Any additional information:



St. Peter Catholic Church
 125 Barr Steet
 Lexington, KY 40507

MEMBER REGISTRATION FORM

Please Fill out the required information for each family member

PERSONAL INFORMATION

Member Information

 Last Name First Name Middle Name Nickname

M F

 Gender Marital Status Occupation Religion

 Birthdate Birthplace

 Birth father Birth mother mothers maiden name

SACRAMENTS

Baptism

Full Baptism Name Date (is this actual or approx. date) Godparents

 Church Name Church Address or location

First Communion

 1st Communion Date Church Name and Address Performed by

Confirmation

 Chosen Confirmation Name Date (is this actual or approx. date) Performed by

 Church Name and Address Sponsor

Marriage

 Wedding Date Spouse's Name Annulled?

 Church Name and Address Performed by

Additional information or comments: _____



St. Peter Catholic Church
 125 Barr Steet
 Lexington, KY 40507

MEMBER REGISTRATION FORM

Please Fill out the required information for each family member

PERSONAL INFORMATION

Member Information

 Last Name First Name Middle Name Nickname

M F

 Gender Marital Status Occupation Religion

 Birthdate Birthplace

 Birth father Birth mother Mothers Maiden Name

SACRAMENTS

Baptism

Full Baptism Name Date (is this actual or approx. date) Godparents

 Church Name Church Address or location

First Communion

 1st Communion Date Church Name and Address Performed by

Confirmation

 Chosen Confirmation Name Date (is this actual or approx. date) Performed by

 Church Name and Address Sponsor

Marriage

 Date Spouse's Name annulled

 Church Name and Address Performed by

Additional information or comments: _____



St. Peter Catholic Church
 125 Barr Steet
 Lexington, KY 40507

MEMBER REGISTRATION FORM

Please Fill out the required information for each family member

PERSONAL INFORMATION

Member Information -

Last Name	First Name	Middle Name	Nickname
M F			
Gender	Grade	School	Religion
Birthdate		Birthplace	
Birth father	Birth mother	mothers maiden name	

SACRAMENTS

Baptism

Full Baptism Name	Date (is this actual or approx. date)	Godparents
Church Name	Church Address or location	

First Communion

1st Communion Date	Church Name and Address	Performed by
--------------------	-------------------------	--------------

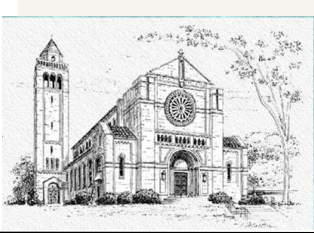
Confirmation

Chosen Confirmation Name	Date (is this actual or approx. date)	Performed by
Church Name and Address	Sponsor	

Marriage

Wedding Date	Spouse's Name	Annulled
Church Name and Address	Performed by	

Additional information or comments: _____



Name: _____

Phone or email: _____

ST. PETER PARISH IN ON A MISSION...

To worship, educate and serve our community. This mission witnesses our love for God, His Church, St. Peter Parish & our neighbors. The Holy Spirit encourages and fortifies everyone to give his/her heart to God for the sake of building His Kingdom. How is God calling you to express your love? **THANK YOU** for offering this gift of love, which is St. Peter Parish on a mission.

Please check any areas you have interest in and someone from that committee will be glad to call you to discuss. Thanks!

Liturgy Ministries

Comments

Family member to contact

- Flowers, decorating the church environment _____
- Wash servers' robes & priest/deacon albs _____
- Care of altar linens _____
- Extraordinary Minister of Holy Communion _____
- Lector _____
- Usher/Greeter _____
- Server _____
- Choir Member _____
- Instrumentalist _____

Faith Formation and Sacramental Preparation

- Team Member of Rite of Christian Initiation (RCIA) _____
- RCIA and/or Confirmation Sponsor _____
- Religious Education Instructor or Assistant _____
- Youth Group Team member _____

Service Ministries

- BUILD justice Ministry _____
- Respect for Life Committee _____
- Bereavement Committee _____
- Food Preparation (as needed) _____
- St. Vincent de Paul Society _____
- Member of parish prayer chain _____
- Assist with coffee & donuts on Sunday morning _____
- Provide transportation for persons unable to drive to church _____
- Rosary Club _____

Parish Committees

- Parish Council _____
- Liturgy Committee _____
- Buildings & Grounds Committee _____
- Social Committee _____
- Finance Council _____
- FUNdraising Committee _____