

FAMILY NAME: _____ **ID/Env #:** _____

REGISTRATION DATE: _____

(Please send exact dates of your sacraments)

HEAD OF HOUSEHOLD (MALE)

LAST NAME: _____

FIRST NAME: _____ MIDDLE: _____

TITLE: _____ DATE OF BIRTH: _____

OCCUPATION: _____ RELIGION: _____

MARRIED, DIVORCED, WIDOWED, SINGLE: _____

SACRAMENTAL INFORMATION (DATE, NAME OF CHURCH, CITY & STATE)

BAPTISM: _____

FIRST EUCHARIST: _____

CONFIRMATION: _____

MARRIAGE: _____

HEAD OF HOUSEHOLD (FEMALE)

LAST NAME: _____ MAIDEN NAME: _____

FIRST NAME: _____ MIDDLE: _____

TITLE: _____ DATE OF BIRTH: _____

OCCUPATION: _____ RELIGION: _____

MARRIED, DIVORCED, WIDOWED, SINGLE: _____

SACRAMENTAL INFORMATION (DATE, NAME OF CHURCH, CITY & STATE)

BAPTISM: _____

FIRST EUCHARIST: _____

CONFIRMATION: _____

MARRIAGE: _____

ADDRESS

NUMBER & STREET: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE & EMAIL

HOME: _____ WORK: _____

CELL: _____ EMAIL: _____

Please check one:

Envelopes _____

E-Giving: Register at stcasimir.org _____ Click on the Blue E-Giving Box

CHILDREN LIVING IN HOUSEHOLD

LAST NAME: _____

FIRST NAME: _____ MIDDLE: _____

MALE/FEMALE: _____ DATE OF BIRTH: _____

SACRAMENTAL INFORMATION (DATE, NAME OF CHURCH, CITY & STATE)

BAPTISM: _____

FIRST EUCHARIST: _____

CONFIRMATION: _____

LAST NAME: _____

FIRST NAME: _____ MIDDLE: _____

MALE/FEMALE: _____ DATE OF BIRTH: _____

SACRAMENTAL INFORMATION (DATE, NAME OF CHURCH, CITY & STATE)

BAPTISM: _____

FIRST EUCHARIST: _____

CONFIRMATION: _____

LAST NAME: _____
 FIRST NAME: _____ MIDDLE: _____
 MALE/FEMALE: _____ DATE OF BIRTH: _____
 SACRAMENTAL INFORMATION (DATE, NAME OF CHURCH, CITY & STATE)
 BAPTISM: _____
 FIRST EUCHARIST: _____
 CONFIRMATION: _____

LAST NAME: _____
 FIRST NAME: _____ MIDDLE: _____
 MALE/FEMALE: _____ DATE OF BIRTH: _____
 SACRAMENTAL INFORMATION (DATE, NAME OF CHURCH, CITY & STATE)
 BAPTISM: _____
 FIRST EUCHARIST: _____
 CONFIRMATION: _____

PARISH INVOLVEMENT

I AM INTERESTED IN AND/OR WOULD LIKE MORE INFORMATION ABOUT THE FOLLOWING AREAS OF SERVICE & PARTICIPATION THE FAITH COMMUNITY:

- | | | | |
|--|-------------------------------------|---|---|
| <input type="checkbox"/> Altar Server | <input type="checkbox"/> Decorating | <input type="checkbox"/> Eucharistic Minister | <input type="checkbox"/> Heavenly Duster |
| <input type="checkbox"/> Greeter | <input type="checkbox"/> Lector | <input type="checkbox"/> Music Minister | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Social Outreach | <input type="checkbox"/> Youth | <input type="checkbox"/> Family Ministry | <input type="checkbox"/> Adult Education |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> School | <input type="checkbox"/> Religious Education | <input type="checkbox"/> Young Adult Ministry |

Other: _____

I would like information about : _____

Welcome!
St. Casimir Church
2800 O'Donnell Street
Baltimore, MD 21224
st.casimir@verizon.net * www.stcasimir.org



Registration Form

Welcome to St. Casimir Church. Please fill out all the requested information in detail and return the form to the parish office. Once we receive the completed form, if you have indicated that you wish to use the parish collection envelopes, you will receive an identification number and envelopes will be mailed to you. We encourage all to use the collection envelopes in support of your parish and, at the same time, it provides a record of attendance and allows us to prepare a statement of donations for tax purposes. Please don't forget to look through our *Welcome Packet*. If you have questions about the registration form, the *Welcome Packet* or about any of the various activities and opportunities for service, please contact the parish office at 410/276-1981. **Welcome!**