

# *St Coleman Catholic Church*

## REGISTRATION FORM

FAMILY NAME \_\_\_\_\_

HUSBAND NAME \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Married ( ) Single ( ) Divorced ( ) Widowed ( )

WIFE NAME \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Married ( ) Single ( ) Divorced ( ) Widowed ( )

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Are you interested in serving in any of our ministries? \_\_\_\_\_

Are you interested in volunteering? If so, what are your interests? \_\_\_\_\_

\_\_\_\_\_

Children Names and Ages (optional)

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Do you have children attending our school? YES ( ) NO ( )

We will automatically send you envelopes. If you do not wish to have them sent to you, please check this box

NO Envelopes ( )

You can also register online at [www.stcoleman.org](http://www.stcoleman.org).

Please use this form for any changes to your information or if you are a new parishioner.

*Thank you for joining our parish!*