

New
 Update

Our Lady of Fatima Parish
50 Van Winkle Pl. Piscataway, NJ 08854

Reg. Date:

Family Registration

Last Name(s) _____

Mailing Names (i.e. Mr. & Mrs. John Smith) _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Emergency Phone _____

Family Email: _____ Contribution Envelope # _____
N/A for new registrants

Individual Member Information

Head of Household (1)

Head of Household (2)

Parish Status (Active, Inactive) _____

Gender: M F Role: husband, wife, etc. _____

M F Role: husband, wife, etc. _____

First Name _____

Nick Name _____

Maiden Name _____

D.O.B. (mm/dd/yyyy) _____

Work Phone _____

Cell Phone _____

Occupation _____

Primary Language Spoken at Home _____

Sacramental Info: Baptized? yes no

Baptized? yes no

If yes, in what Faith? _____ Date _____

If yes, in what Faith? _____ Date _____

Reconciliation? yes no Date _____

Reconciliation? yes no Date _____

First Eucharist? yes no Date _____

First Eucharist? yes no Date _____

Confirmation? yes no Date _____

Confirmation? yes no Date _____

Circle Marital Status: Single Married Widow /Widower

Separated Divorced Annulled

Married by a Catholic Priest/Deacon? yes no Date _____ Where? _____

If not, by whom? _____ Where? _____

DEPENDENT CHILDREN INFORMATION (Ages 18 and Under, Oldest to Youngest)

Relationship to Head of Household (1)	First Name	Last Name	Gender	Birthdate
1. _____	_____	_____	M / F	_____
				mm/dd/yyyy

Does the child speak English? Yes _____ No _____ Birthplace _____

Check all sacraments received. Add date if known.

__ Baptism (__ <i>In Catholic Faith</i> __ <i>Other</i>)	__ First Eucharist	__ Reconciliation	__ Confirmation
_____	_____	_____	_____
mm/dd/yyyy	mm/dd/yyyy	mm/dd/yyyy	mm/dd/yyyy

Relationship to Head of Household (1)	First Name	Last Name	Gender	Birthdate
2. _____	_____	_____	M / F	_____
				mm/dd/yyyy

Does the child speak English? Yes _____ No _____ Birthplace _____

Check all sacraments received. Add date if known.

__ Baptism (__ <i>In Catholic Faith</i> __ <i>Other</i>)	__ First Eucharist	__ Reconciliation	__ Confirmation
_____	_____	_____	_____
mm/dd/yyyy	mm/dd/yyyy	mm/dd/yyyy	mm/dd/yyyy

Relationship to Head of Household (1)	First Name	Last Name	Gender	Birthdate
3. _____	_____	_____	M / F	_____
				mm/dd/yyyy

Does the child speak English? Yes _____ No _____ Birthplace _____

Check all sacraments received. Add date if known.

__ Baptism (__ <i>In Catholic Faith</i> __ <i>Other</i>)	__ First Eucharist	__ Reconciliation	__ Confirmation
_____	_____	_____	_____
mm/dd/yyyy	mm/dd/yyyy	mm/dd/yyyy	mm/dd/yyyy

Please list the names of non-dependent adult children

Name _____ Town/state of residence _____

Name _____ Town/state of residence _____

Name _____ Town/state of residence _____

Name _____ Town/state of residence _____

Name _____ Town/state of residence _____

STEWARDSHIP

Last Name: _____

First Name(s): 1. _____ 2. _____

Phone Numbers: 1. _____ 2. _____

E-mail addresses: 1. _____ 2. _____

What is your profession / area of expertise? Enter first name on applicable line.

Accountant _____	Lawyer _____
Bookkeeper _____	Maintenance _____
Carpenter _____	Mason _____
Computer Specialist _____	Media _____
Cook _____	Nurse _____
Dentist _____	Painter _____
Electrician _____	Physician _____
Electronics _____	Plumber _____
Heating _____	Refrigeration _____
Keyboarding/Clerical _____	Teacher _____
Landscaper _____	Other _____

Would you be willing to volunteer your professional services to the parish? Yes _____ No _____

Would you be interested in joining any of the following parish ministries/organizations?

<p>_____ Adult Choir</p> <p>_____ Altar Servers</p> <p>_____ Boy Scouts</p> <p>_____ Cantors</p> <p>_____ CCD Teachers</p> <p>_____ Children's Choir</p> <p>_____ Eucharistic Guardians</p> <p>_____ Evangelization Committee</p> <p>_____ Extraordinary Ministers of Holy Communion</p> <p>_____ Fatima Candlelight Procession</p> <p>_____ Filipino American Association</p> <p>_____ Filipino Choir</p> <p>_____ Greeters/Ushers</p> <p>_____ Holy Trinity Charismatic Prayer Group</p>	<p>_____ Junior Legion of Mary</p> <p>_____ Lazarus Ministry</p> <p>_____ Lectors</p> <p>_____ Legion of Mary</p> <p>_____ Military Support Group</p> <p>_____ Organists</p> <p>_____ Parish Anniversary Committee</p> <p>_____ Precious Blood Charismatic Prayer Group</p> <p>_____ Respect Life Group</p> <p>_____ Rosary Altar Society</p> <p>_____ Senior Citizens</p> <p>_____ Stewardship Committee</p> <p>_____ Vocations Committee</p> <p>_____ Youth Group</p>
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