

St. Cecilia Parish – Registration Form

Instructions

1. Download & Complete this form.
2. Return the form to St. Cecilia:
 - a. Email to Barbara Browarsky: bbrowarsky@cinci.rr.com
 - b. Or, Mail to the Rectory (Attn. Barbara Browarsky):
3105 Madison Rd, Cincinnati, OH 45209
 - c. Or, Place in the Collection Basket during Mass.

General Information

Head of Household Name:	Write name here.		
Home Phone #:	Enter # here.	Phone # Listed?:	Enter Yes or No.
Alternate Phone #:	Enter # here.	Alt Phone Type:	Enter type – eg. cell, work, etc.
Address:	Street Address	City, State	Zip
Years in Parish:	If new member, enter New.		

Family & Religious Information

	Head of Household	Spouse	Child 1	Child 2	Child 3	Child 4	Child 5
First Name							
Middle Name or Initial							
Last Name							
Marital Status*							
Religion							
Occupation (and grade, if student)							
Company/School							
Sex: M or F							
Date of Birth							
Baptized? Yes or No.							
1 st Communion? Yes or No.							
Confirmed? Yes or No.							
Date Married							

* Please use: CM=Church Married, M=Married outside the Catholic Church, SIN=Single, WID=Widowed, SEP=Separated, DIV=Divorced

Time & Talent Survey

Enter an "X" in the appropriate column.

	Already Involved With	Would Like to Get Involved
Parish Council		
Worship Commission		
Bereavement Committee		
Choir		
Church Cleaning		
Eucharistic Minister		
Lector		
Greeter		
Prayer Line		
RCIA		
Servers		
Ushers		
Education Commission		
PREP Program (CCD)		
St. Cecilia School		
Boosters		
PTA		
Legion of Mary		
St. Vincent de Paul		
Thanksgiving Dinner		
Christmas Dinner		
Garden Crew		
Buildings & Grounds Committee		
Cub Scouts		
Girl Scouts		
Festival		
Other: Please Specify		

Attendance & Contribution Survey

Enter an "X" in the appropriate column.

	Regular (Weekly) Attendance	Other (Please Explain)
Anticipated Church Attendance		

For our Financial Planning, it is helpful to know what our parishioners plan to contribute. While this section is optional, we hope that you will consider completing this information.

Anticipated Weekly Contribution:	\$
Would you like to receive Donation Envelopes?	Yes or No.
Would you like information regarding Contribution Direct Deposit?	Yes or No.

Thank you for your interest in joining our St. Cecilia Family!

Would you like to be contacted by a member of our Staff?	Yes or No.
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