



# Abiding Presence Reformed Catholic Church

## Member Registration Form

**(CONFIDENTIAL – For Church Use Only)**

Registration #: \_\_\_\_\_

(Please return completed form to Parish Office, 5330 Poinsetta Ave, Winter Park, FL 32792-7234, or give it to the priest after Mass.)

Were you previously registered here? \_\_\_\_\_ Yes \_\_\_\_\_ No

Year you joined this parish: \_\_\_\_\_

Family (Last) Name: _____	Telephone: _____	Date: _____
Address: _____		
Housing Development: _____		
City: _____	State: _____	Zip: _____ Email: _____

Single Male/Husband/Spouse: _____	D.O.B.: _____	Religion: _____	Marital Status: _____
Occupation – Place of Business _____		Business Phone: _____	
Single Female/Wife/Spouse: _____			
(First & Maiden Name): _____		D.O.B. _____ Religion: _____ Marital Status: _____	
Occupation – Place of Business _____		Business Phone: _____	

List each family member: First Name & Last Name (if different)	D.O.B.	Sex	Baptism	Eucharist	Penance	Confirmation	Name of School or Occupation
Others in Household – Relationship							

**Please indicate interests by Family Member name, if any:**

<b>MUSIC:</b>	_____	Cantor	<b>RELIGIOUS ED:</b>	_____	Adult Ed		
	_____	Choir		_____	Aide		
	_____	Keyboard Musician		_____	Teacher		
	_____	Other Musician		_____	Pre-School	_____	Elem
	_____	Other (_____)		_____	Middle	_____	High
<b>YOUTH:</b>	_____	Young Adult	<b>OFFICE:</b>	_____	Bulletin		
	_____	Youth Retreats		_____	Webmaster		
	_____	Youth Group		_____	Word Processing		
<b>OUTREACH:</b>	_____	Home Visitation	<b>LITURGY:</b>	_____	Eucharist Minister		
	_____	Nursing Home Visit		_____	Reader		
	_____	HIV/Aids		_____	Hospitality – Usher		
	_____	Hispanic		_____	Altar Server		
	_____	Ministry to the Sick		_____	Greeter		
<b>PARISH COMMITTEES:</b>	_____	Parish Council	_____	Development	_____	Education	
	_____	Women	_____	Welcome	_____	Finance	

**Other Ministry Suggestions:**

**Special Needs:**