

San Juan Catholic Community Parishioner Registration Form

Head of Household:

Last Name: _____ Middle Initial _____ First Name: _____ DOB: _____

Spouse:

Last Name: _____ Middle Initial: _____ First Name: _____ DOB: _____

Names of Children/Dependents: (please put DOB (date of birth) next to name)

_____	_____
_____	_____
_____	_____

Family Information:

Residential Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (If different than Residential Address): _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Cell Phone #: _____ Email: _____

Church Affiliation: Please check which church you wish to be affiliated with:

_____ Holy Family - South Fork

_____ Holy Name of Mary - Del Norte

_____ Immaculate Conception - Creede

_____ St. Joseph – Monte Vista

_____ St. Francis of Assisi – Plaza

Do you want to receive Flocknotes in the form of a text message? Yes _____ No _____

Do you want collection envelopes? Yes _____ No _____ If you already have them, envelope # _____

I would like to volunteer my talents/skills in the following areas (i.e. maintenance, accounting, janitorial, cooking, office work, etc.): _____

(Continued on the Back)

**San Juan Catholic Community
Parishioner Registration Form
(cont.)**

I would be willing to serve and give of my time/talent in the following ministries:

Music: _____

Lector: _____

Usher: _____

Altar Server: _____

Greeter: _____

Sacristan: _____

Eucharistic Minister: _____

Homebound: _____

Parish Council: _____

Finance Council: _____

Liturgy Committee: _____

Collection Counter: _____

Environment Committee: _____

Funeral Committee: _____

Religious Education: _____

Vacation Bible School

(Totus Tous): _____

Fellowship Committee: _____

Gift Store: _____

Other: _____

Any other comments or suggestions: _____
