



# St. Mary Our Lady of the Seven Sorrows Roman Catholic Church

56 Duke Street West, Kitchener ON N2H 3W7  
Phone: 519-576-3860 Email: stmarys@rogers.com  
Website: stmarysrcchurch.ca

## Parish Registration Form

Date: \_\_\_\_\_

New Registration       Registration Update

**FAMILY INFORMATION - PLEASE PRINT CLEARLY**

Family Last Name:
<u>Complete Home Address:</u> (Including City & Postal Code)
Primary Telephone:
Primary Email Address:

Marital Status:     Single       Married       Widowed  
 Separated       Divorced       Common-Law

Date & Place of Marriage: \_\_\_\_\_  
Church name & Denomination \_\_\_\_\_  
or Civil: \_\_\_\_\_

**FAMILY MEMBER(S) INFORMATION: Please complete ALL sections.**

	First Name	Family Last Name (if different from above)	Birth Date (MM/DD/YYYY)	Gender	* Religious Denomination (RC, Lutheran, Anglican, etc)	Occupation or School	Sacraments Received		
				<input type="checkbox"/> M <input type="checkbox"/> F			Baptism	First Eucharist	Confirmation
Primary Member				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spouse				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\* If you are not Catholic, are you interested in exploring the possibility by taking part in our RCIA (Rite of Christian Initiation) program?     Yes     No

*Please ONLY include children under 18 who are living at home and not married*

Child				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child				<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PARISH FINANCIAL SUPPORT - please indicate how you would like to support St. Mary's with your gift of treasure ...**

I/we would like to use Pre-Authorized Giving (please complete enclosed enrollment form) (withdrawals occur the 15th of each month directly from your account)       I/we would like Sunday Offertory Envelopes (a personalized box of envelopes will be ready for you next weekend, on the table at the back of the church)

Sunday Church donations can be made via e-transfer to stmarys@rogers.com and Tiny Home Takeout donations to tinymhometakeout@gmail.com

**PARISH MINISTRIES SUPPORT - please indicate any of our volunteer ministries you would like to support with your gifts of time & talent ...**

Lector       Greeter/Usher       ReconciliACTION Circle       Choir       Loaves & Laughter Bread Making

Youth Altar Server       Catholic Amigo: (young adults 20's & 30's)       Connecting Generations (senior's age 60+)

Tiny Home Takeout - email  
tinymhometakeout@gmail.com  
directly to volunteer

St. Vincent de Paul: email  
don@teambilton.com directly to  
volunteer

A Better Tent City: email  
abettertentcity@gmail.com  
directly to volunteer

**PLEASE COMPLETE AND RETURN BY EMAIL OR PLACE IN THE COLLECTION BASKET AT MASS**

Office Use: Date: _____	#: _____	email: _____
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