



Photography By Charles Arabella

MEMBER REGISTRATION / UPDATE FORM

St. Joseph Church

40 Spring Street, Lodi, New Jersey 07644, USA

(973) 779-0643

FAMILY NAME (PLEASE PRINT):

REGISTRATION DATE:
(MM/DD/YYYY)

___/___/___

HOME ADDRESS:

STREET	APARTMENT	CITY	STATE	ZIP CODE

MAILING ADDRESS (IF DIFFERENT FROM HOME ADDRESS):

STREET	APARTMENT	CITY	STATE	ZIP CODE

PRIMARY PHONE NUMBER:	PUBLISHED? YES <input type="radio"/> NO <input type="radio"/>
MOBILE NUMBER/S:	MAY WE PUBLISH IN OUR DIRECTORY? YES <input type="checkbox"/> NO <input type="checkbox"/>

E-MAIL ADDRESS/ES:

OFFERTORY INFORMATION

Contributions for the Glory of God. Choose one.

On-line Giving (Preferred. Reduces cost to the Parish)

Offering Envelopes. To be mailed monthly.

OFFICE USE ONLY

Date: (mm/dd/yyyy)	Envelope # / E-giving:
Entered in PDS:	Entered by:
Follow-up Dates: 1. 2. 3. 4.	

HEAD OF HOUSEHOLD		FIRST NAME	LAST NAME	M / F	RELIGION
BIRTH <input type="checkbox"/>		BAPTISM	FIRST COMMUNION	CONFIRMATION	
DATE		DATE	DATE	DATE	
PLACE		PLACE	PLACE	PLACE	
SPOUSE		FIRST NAME	LAST NAME	M / F	RELIGION
BIRTH <input type="checkbox"/>		BAPTISM	FIRST COMMUNION	CONFIRMATION	
DATE		DATE	DATE	DATE	
PLACE		PLACE	PLACE	PLACE	
MARITAL STATUS:		IF MARRIED, WIFE'S MAIDEN NAME:			MARRIED BY:
SINGLE <input type="checkbox"/>					<input type="checkbox"/> CATHOLIC PRIEST
MARRIED <input type="checkbox"/>		DATE OF MARRIAGE:			
WIDOW/ER <input type="checkbox"/>		CHURCH:			<input type="checkbox"/> CIVIL CEREMONY
DIVORCED <input type="checkbox"/>		LOCATION:			
CHILD 1:		FIRST NAME	LAST NAME	M / F	RELIGION
REGISTERED IN RELIGIOUS EDUCATION? Y <input type="checkbox"/> N <input type="checkbox"/>					
BIRTH		BAPTISM	FIRST COMMUNION	CONFIRMATION	
DATE		DATE	DATE	DATE	
PLACE		PLACE	PLACE	PLACE	
CHILD 2:		FIRST NAME	LAST NAME	M / F	RELIGION
REGISTERED IN RELIGIOUS EDUCATION? Y <input type="checkbox"/> N <input type="checkbox"/>					
BIRTH		BAPTISM	FIRST COMMUNION	CONFIRMATION	
DATE		DATE	DATE	DATE	
PLACE		PLACE	PLACE	PLACE	
CHILD 3:		FIRST NAME	LAST NAME	M / F	RELIGION
REGISTERED IN RELIGIOUS EDUCATION? Y <input type="checkbox"/> N <input type="checkbox"/>					
BIRTH		BAPTISM	FIRST COMMUNION	CONFIRMATION	
DATE		DATE	DATE	DATE	
PLACE		PLACE	PLACE	PLACE	
CHILD 4:		FIRST NAME	LAST NAME	M / F	RELIGION
REGISTERED IN RELIGIOUS EDUCATION? Y <input type="checkbox"/> N <input type="checkbox"/>					
BIRTH		BAPTISM	FIRST COMMUNION	CONFIRMATION	
DATE		DATE	DATE	DATE	
PLACE		PLACE	PLACE	PLACE	
CHILD 5:		FIRST NAME	LAST NAME	M / F	RELIGION
REGISTERED IN RELIGIOUS EDUCATION? Y <input type="checkbox"/> N <input type="checkbox"/>					
BIRTH		BAPTISM	FIRST COMMUNION	CONFIRMATION	
DATE		DATE	DATE	DATE	
PLACE		PLACE	PLACE	PLACE	

PLEASE MARK THE APOSTOLATE THAT YOU AND/OR YOUR FAMILY ARE INTERESTED IN OR IN WHICH YOU ARE ALREADY AN ACTIVE MEMBER.

A MEMBER OF THE PARISH GROUP WILL GET IN TOUCH WITH YOU.

RELIGIOUS EDUCATION	Active	Interested	LITURGICAL	Active	Interested
Religious Ed. Program	<input type="checkbox"/>	<input type="checkbox"/>	Alter Servers	<input type="checkbox"/>	<input type="checkbox"/>
Special Needs Rel. Ed.	<input type="checkbox"/>	<input type="checkbox"/>	Lectors	<input type="checkbox"/>	<input type="checkbox"/>
RCIA (Adult Catechism)	<input type="checkbox"/>	<input type="checkbox"/>	Eucharistic Ministers	<input type="checkbox"/>	<input type="checkbox"/>
Bible Study	<input type="checkbox"/>	<input type="checkbox"/>	Ushers	<input type="checkbox"/>	<input type="checkbox"/>
Faith Sharing	<input type="checkbox"/>	<input type="checkbox"/>	Greeters	<input type="checkbox"/>	<input type="checkbox"/>

PARISH ORGANIZATION	Active	Interested	VOLUNTEERING	Active	Interested
Young Adult (18-30 y/o)	<input type="checkbox"/>	<input type="checkbox"/>	CCD Teacher	<input type="checkbox"/>	<input type="checkbox"/>
CYO (13 y/o and older)	<input type="checkbox"/>	<input type="checkbox"/>	CCD Aide	<input type="checkbox"/>	<input type="checkbox"/>
Catholic Daughters	<input type="checkbox"/>	<input type="checkbox"/>	Church Cleaning	<input type="checkbox"/>	<input type="checkbox"/>
Couples for Christ (CFC)	<input type="checkbox"/>	<input type="checkbox"/>			
Filipino Apostolate	<input type="checkbox"/>	<input type="checkbox"/>			
Foundation for Family Life	<input type="checkbox"/>	<input type="checkbox"/>			
Immaculate Conception	<input type="checkbox"/>	<input type="checkbox"/>			
Knights of Columbus	<input type="checkbox"/>	<input type="checkbox"/>			
Lay Assoc St. Francis Caracciolo	<input type="checkbox"/>	<input type="checkbox"/>			
Rosary Society	<input type="checkbox"/>	<input type="checkbox"/>			
St. Joseph Society	<input type="checkbox"/>	<input type="checkbox"/>			
St. Joseph Society (Aux. Women)	<input type="checkbox"/>	<input type="checkbox"/>			

**There are many other ways to volunteer.
Please contact the Rectory Office (973)
779-0643 for more information.**

FAMILY SPECIAL NEEDS
(i.e. Homebound, House Blessing, Spiritual Direction, Baptism, Marriage, etc.)