

Fr. Jack: _____ Date: _____

St. Anthony's Parish
New Parishioner Registration

Welcome to St. Anthony's Parish. We are grateful that you worship with us and have decided to register in the parish. Be assured of pastoral support from St. Anthony's. Please complete the following and return to the Parish Office or collection basket. Phone the parish office if you would like to be visited. In the parish bulletin you will find most of the important information about our parish or you may visit the web site at: www.stanthonycalgary.com. God bless you and welcome to our Parish Family of St. Anthony's. A formal letter of welcome will follow.

Family Name _____ Given Name(s) _____ <input type="checkbox"/> Family <input type="checkbox"/> Single			WIFES MAIDEN NAME: _____																				
Address: _____ _____ Postal Code: _____ Email: _____	Phone: _____ Alternate phone: _____ How long have you lived in the parish? _____ Occupation: _____ Occupation: _____																						
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="padding: 2px;">Child</th> <th style="padding: 2px;">Birth date</th> <th style="padding: 2px;">School</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Child	Birth date	School																			Are there any members of the household in need of sacraments? Baptism: First Holy Communion: First Reconciliation: Confirmation: Anointing of the Sick: Other:	
Child	Birth date	School																					

If you (and/or family members) are interested in serving on any particular committees or ministries of the parish, please check below:

<input type="checkbox"/> Reader	<input type="checkbox"/> Adult Funeral Altar Servers	<input type="checkbox"/> Knights of Columbus
<input type="checkbox"/> Extra Ordinary Eucharistic Minister	<input type="checkbox"/> Altar Servers	<input type="checkbox"/> Legion of Mary
<input type="checkbox"/> Share the Word Children's Liturgy	<input type="checkbox"/> Welcome Minister	<input type="checkbox"/> Art & Environment (flowers)
<input type="checkbox"/> Bible Study	<input type="checkbox"/> Choir 5 PM 9 AM and 10:30 AM	<input type="checkbox"/> St. Anthony's Pantry
<input type="checkbox"/> Martha's Table (Funeral Lunches)	<input type="checkbox"/> Latin Choir	<input type="checkbox"/> Sacred Linen /Alb laundering
<input type="checkbox"/> Hall Kitchen (upkeep)	<input type="checkbox"/> Usher <input type="checkbox"/> Greeter	<input type="checkbox"/> Votive Candles /Holy Water
<input type="checkbox"/> Sunday Hospitality (coffee & Muffins)	<input type="checkbox"/> Pastoral Care	<input type="checkbox"/> Committed Adorer <input type="checkbox"/> Alternate Adorer

Which Mass do you attend?

5PM Saturday
 7:15 AM Sunday Latin
 9 AM Sunday
 10:30 AM Sunday
 12:30 Sunday Latin

Your comments and suggestions are appreciated:

Would you like to receive parish envelopes? **OR** Pre-authorized Withdrawal (PAW)

Signature: _____

Date: _____