

Transfiguration Catholic Church Membership Registration

Census Form Office Use
Env # _____
Date: _____
Entered: _____

Family Name: _____

Home Phone _____ Unlisted Yes () No ()

Street Address: _____

City _____ State _____ Zip- _____

Env # _____

P.O. Box: _____ Subdivision/Apartment Complex _____

Husband's E-Mail Address _____

Date: _____

Title: Mr. () Mrs. () Miss () Dr. () Other: _____

Wife's E-Mail Address _____

Entered: _____

Husband's Marital Statuses? Single () Married () Separated ()
 Check all that Apply Divorced () Widowed () Remarried ()

Annulments? Y / N Cell Phone _____ Unlisted Yes () No ()
 Husband's Cell _____

Wife's Marital Statuses? Single () Married () Separated ()
 Check all that Apply Divorced () Widowed () Remarried ()

Annulments? Y / N Cell Phone _____ Unlisted Yes () No ()
 Wife's Cell _____

Married to Each Other Where? Catholic Church () Other Church () Other Place ()
With Catholic Church Permission? Yes () No ()

Civil Only () How Did You Hear About Us? _____

Description	(1) Head of Household	(2) Spouse	(3) Child at Home	(4) Child at Home (Use separate sheet for additional children)
First Name				
Name You Go By				
Sex (M or F)				
Religion				
Occupation or Profession				
Current Grade in School (Children)				
Preferred Method of Communication	Home / Email / Cell	Home / Email / Cell	Through Parents	Through Parents
Birth Date (mm/dd/yyyy)	___/___/___	___/___/___	___/___/___	___/___/___
Baptism (mm/dd/yyyy)	___/___/___	___/___/___	___/___/___	___/___/___
Church, City, State				
1st Communion (mm/dd/yyyy)	___/___/___	___/___/___	___/___/___	___/___/___
Church, City, State				
Confirmation (mm/dd/yyyy)	___/___/___	___/___/___	___/___/___	___/___/___
Church, City, State				
Marriage (mm/dd/yyyy)	___/___/___	___/___/___	___/___/___	___/___/___
Church, City, State				

Write in the blank preceding the item of interest, the individual number of the person who is interested. Head of Household - 1; Spouse - 2; Child at Home - 3, 4, etc. These numbers are found on the column headings of the Membership Registration form (reverse side).

Worship	Evangelisation	Service Ministries	Parish Life	Youth Ministries
___ Altar Servers	___ Evangelization Committee	___ Eucharistic Minister to the Sick and Shut-In	___ Hospitality Ministry	___ Catechist (Gr. K - 5)
___ Lector	___ Adult Faith Formation ___ Small Group Facilitator	___ Service Committee	___ Gardening Club	___ Assistant Catechist (Gr. K - 5)
___ Eucharistic Minister	___ Newspaper Outreach	___ Bereavement/Funeral Ministry	___ Collections Counter	___ Catechist (Gr. 6 - 8)
___ Usher	___ Social Media Outreach	___ Social Outreach	___ Pastoral Council	___ Assistant Catechist (Gr. 6 - 8)
___ Greeter	___ Baptism Preparation	___ Intercessory Prayer Warriors	___ Columbiettes	___ Youth Ministry Team (Gr. 9 - 12)
___ Choir (Singer)	___ R.C.I.A. (Rite of Christian Initiation for Adults) sponsor or catechist	___ Disaster Preparation Team	___ Knights of Columbus	___ Catechist for Confirmation
___ Choir (Instrumentalist)	___ Wedding Coordinator	___ Heavenly Helpers	___ Finance Council	___ Assistant Catechist for Confirmation
___ Sacristan	___ Knitting for Life	___ Rosary Making Ministry	___ Cursillo	___ Young Adult Coordinator
___ Altar Society	___ OTHER: please specify other Ministries needed.	___ OTHER: please specify other Ministries needed.	___ Welcome Committee	___ Volunteer for Vacation Bible School
___ Liturgical Art & Environment			___ Assist with Building/Grounds Maintenance	___ OTHER: please specify other Ministries needed.
___ OTHER: specify other. Ministries needed			___ Stewardship	
			___ Ladies Friday Lunch Club	
			___ OTHER: please specify other Ministries needed.	