



St. Gabriel the Archangel Catholic Parish

316 Windermere Drive
Chestermere, Alberta T1X 0B9

ph. (403) 455-0196

fax. (403) 455-0335

email: office@saintgabrielparish.ca / www.saintgabrielparish.ca

CONFIDENTIAL PARISH REGISTRATION FORM

FAMILY LAST NAME:	
MAILING ADDRESS:	
OTHER ADDRESS: (if different from mailing address)	
CITY & PROVINCE:	POSTAL CODE:
PRIMARY E-MAIL ADDRESS FOR CONTACT:	
WOULD YOU LIKE DONATION ENVELOPES? <input type="checkbox"/> YES <input type="checkbox"/> NO	
WOULD YOU LIKE TO RECEIVE THE WEEKLY BULLETIN BY EMAIL? <input type="checkbox"/> YES <input type="checkbox"/> NO	
PREFERRED MASS TIME: SATURDAY 5 PM <input type="checkbox"/> SUNDAY 9 AM <input type="checkbox"/> SUNDAY 10:30 AM <input type="checkbox"/> NO PREFERENCE <input type="checkbox"/>	

HOME PHONE NO.:	CELL PHONE NO.:
MARITAL STATUS: <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Common-Law	
If Married: Witnessed by a Catholic Priest or Deacon: <input type="checkbox"/> Yes <input type="checkbox"/> No Civil Ceremony: <input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER COMMENTS or NOTES:	

	FIRST NAME	MIDDLE NAME	LAST NAME (if different from Family Name) and MAIDEN NAME	BIRTHDATE (YYYY/MM/DD)	Male/ Female	RELIGION PRACTICING	OCCUPATION or SCHOOL & GRADE	SACRAMENTS COMPLETED (please ✓ all that apply)			
								Baptism	First Communion	Reconciliation/Confession	Confirmation
ADULT								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADULT								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHILD								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHILD								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHILD								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PARISH MINISTRIES: The strength of St. Gabriel's Parish is based on the commitment of parishioners to its many ministries. Please check each of the areas below that may be of interest to you or to a family member. The ministry leader will contact you to provide more information and discuss your potential involvement.

- | | | | | | |
|--|---|---|---|--|--|
| <input type="checkbox"/> Altar Server | <input type="checkbox"/> Children's Liturgy* | <input type="checkbox"/> Finance Council* | <input type="checkbox"/> Lector | <input type="checkbox"/> Projection Operator | <input type="checkbox"/> RCIA (Becoming a Catholic - Adult) |
| <input type="checkbox"/> Baptismal Preparation | <input type="checkbox"/> Donation Counter* | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Music Ministry | <input type="checkbox"/> Usher* | <input type="checkbox"/> Sacramental Preparation (Children)* |
| <input type="checkbox"/> Catholic Women's League (CWL) | <input type="checkbox"/> Eucharistic Minister | <input type="checkbox"/> Knights of Columbus (K of C) | <input type="checkbox"/> Parish Council | <input type="checkbox"/> Youth Ministry* | |

*1 year of previous ministry involvement is required

Office Use Only:

Date Received & Entered: _____ Envelopes Prepared & Number Assigned _____ Welcome Letter Sent: _____