

**OUR LADY OF SORROWS**  
P.O. Box 909 ♦ Snoqualmie, WA 98065  
Phone: 425-888-2974

**REGISTRATION**

NEW

CHANGE

Date

Month /

Day

**HOME ADDRESS**

Street \_\_\_\_\_ Apartment \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Marital Status:     Single     Married     Separated     Divorced     Widowed

If married, were you married by a Catholic priest?     Yes /  No

If not, would you like to have the priest contact you to convalidate your marriage?     Yes /  No

Last Name	First Name	Birthdate	Sex	Ethnicity	Baptism	First Comm.	
<b>Head</b>		___/___/___	<input type="checkbox"/> M <input type="checkbox"/> F	1 2 3 4 5 6 7 8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Spouse</b>		___/___/___	<input type="checkbox"/> M <input type="checkbox"/> F	1 2 3 4 5 6 7 8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		___/___/___	<input type="checkbox"/> M <input type="checkbox"/> F	1 2 3 4 5 6 7 8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		___/___/___	<input type="checkbox"/> M <input type="checkbox"/> F	1 2 3 4 5 6 7 8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		___/___/___	<input type="checkbox"/> M <input type="checkbox"/> F	1 2 3 4 5 6 7 8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		___/___/___	<input type="checkbox"/> M <input type="checkbox"/> F	1 2 3 4 5 6 7 8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		___/___/___	<input type="checkbox"/> M <input type="checkbox"/> F	1 2 3 4 5 6 7 8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**ETHNICITY:**

- (1) Asian
- (2) African
- (3) Hispanic
- (4) Native America
- (5) Pacific Islander,
- (6) Southeast Asia
- (7) White, European-American
- (8) Other (please specify)

**The following is a list of parish activities and ministries in which your family is encouraged to participate. Please indicate your interest in a particular activity.**

Altar Server Ministry

Altar Society (washes linens, cleans church)

Art and Environment

Choir/Musician

Eucharistic Minister

Eucharistic Minister to the Sick & Homebound

Grounds-keeping Ministry (weeding, pruning)

Hospitality Ministry (Ushers ,Greeters & Coffee Hour)

Lector

Parish Office Help

Professional Skills (such as law, plumbing, bookkeeping, investments, building maintenance)

Religious Ed./Sacramental Prep Teams (Catechist, RCIA)

Technological Ministry (web page, telephone, computers)

Other (please specify)\_\_\_\_\_

***GUARANTEE OF CONFIDENTIALITY***

*No registration information is ever released to outside agencies. All individual information is held in the strictest of confidence and used only by the parish.*

***OFFICE USE ONLY***

<b>OFFICE USE ONLY</b>	
<input type="checkbox"/> ID #	<input type="checkbox"/> Welcome Letter
<input type="checkbox"/> COMPLETED	<input type="checkbox"/> Bulletin