

St. James Catholic Church

5504 20th St. S.W.
Calgary, AB T3E 1R2

Registration Form (PLEASE PRINT)

Today's Date: _____

Registrant's First Name(s) (PRINT)

Registrant's Last Name(s) (PRINT)

Street Address (PRINT)

Calgary, Alberta

Postal Code

Home Phone

Cell Phone

Email

How many family members are included in this Registration Form? _____

ADDITIONAL ADULTS (PLEASE PRINT NAMES)

#1: _____
First and Last Name

Relationship to Registrant

Email

Cell Phone #

#2: _____
First and Last Name

Relationship to Registrant

Email

Cell Phone #

CHILDREN (PLEASE PRINT NAMES)

#1: _____
First and Last Name

Relationship to Registrant

Birthdate (Month/Day/Year)

#2: _____
First and Last Name

Relationship to Registrant

Birthdate (Month/Day/Year)

#3: _____
First and Last Name

Relationship to Registrant

Birthdate (Month/Day/Year)

#4: _____
First and Last Name

Relationship to Registrant

Birthdate (Month/Day/Year)

PLEASE SEE BACK OF PAGE FOR A CONTINUATION OF REGISTRATION INFORMATION



Previous Parish: _____

Tell us a little about yourself: (work/life experience, educational background, hobbies, volunteer experience in the Church and in your community).

Volunteer Opportunities (check those you may be interested in):

- | | |
|--|--|
| <input type="checkbox"/> Eucharistic Minister | <input type="checkbox"/> Pastoral Care/Visiting the Sick |
| <input type="checkbox"/> Lector | <input type="checkbox"/> Sacristan |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Food Bank |
| <input type="checkbox"/> Money Counter | <input type="checkbox"/> Funeral Lunches |
| <input type="checkbox"/> Children's Liturgy Leader | <input type="checkbox"/> Altar Server |
| <input type="checkbox"/> Children's Liturgy Helper | <input type="checkbox"/> Knights of Columbus |
| <input type="checkbox"/> Choir | <input type="checkbox"/> Building Maintenance |
| <input type="checkbox"/> Church Decorating | <input type="checkbox"/> Sacrament Preparation |
| <input type="checkbox"/> Usher | <input type="checkbox"/> Other: _____ |

What Mass do you attend? _____

Would you be interested in:

Donation Envelopes? _____ Preauthorized withdrawal? _____

THIS FORM MAY BE DROPPED OFF AT THE PARISH OFFICE OR DROPPED INTO THE COLLECTION BASKET