



**SAINTE AUGUSTINE CATHEDRAL
192 SOUTH STONE AVENUE
TUCSON, ARIZONA 85701**

PARISH REGISTRATION FORM

___ New Parish Member ___ Current Parish Member - Update Information (Env # _____)

FAMILY LAST NAME: _____

ADDRESS: _____
(City) _____ (Zip Code) _____

PHONE: _____ (Home) _____ (Cell) _____ (Other) _____

E-MAIL: _____

EMPLOYMENT:
Head of Household: (Occupation) _____

Spouse: (Occupation) _____

MARITALSTATUS: ___ Single ___ Married _____
(Church of Marriage if married through Church)

___ Married through the Court only

MEMBER NAMES	Date of Birth Male / Female	Baptized Yes / No	Confirmed Yes / No	First Holy Communion Yes / No	School Grade
(Head of Household)					
(Spouse)					
(Children living with you)					

(√) I ___ want / ___ do not want to use envelopes for my weekly contribution.
END-OF-YEAR TAX LETTER WILL BE SENT ONLY TO ENVELOPE USERS.

Please complete back of form. Thank you.

Please indicate (✓) which Ministries you or members of your family would be interested in giving your Time and Talent. You will be contacted by the Ministry Leader.

Please note: *Volunteers must complete an application and compliance requirements.*

- | | |
|--|--|
| <input type="checkbox"/> Altar Servers | <input type="checkbox"/> Office Support |
| <input type="checkbox"/> Beautification / Maintenance | <input type="checkbox"/> Parking Lot * |
| <input type="checkbox"/> _____ of Church (<i>Decorations</i>) | <input type="checkbox"/> RCIA * |
| <input type="checkbox"/> _____ of Grounds | <input type="checkbox"/> Religious Education * |
| <input type="checkbox"/> Counter (<i>Offertory Collection</i>) | <input type="checkbox"/> _____ Elementary |
| <input type="checkbox"/> Choir | <input type="checkbox"/> _____ Middle School |
| <input type="checkbox"/> _____ English | <input type="checkbox"/> _____ High School |
| <input type="checkbox"/> _____ Spanish | <input type="checkbox"/> Sacristan * |
| <input type="checkbox"/> Docents (<i>Cathedral Tours</i>) | <input type="checkbox"/> Security |
| <input type="checkbox"/> Eucharistic Ministers * | <input type="checkbox"/> St. Vincent de Paul |
| <input type="checkbox"/> _____ Mass | <input type="checkbox"/> Usher |
| <input type="checkbox"/> _____ Homebound | <input type="checkbox"/> Youth Ministry * |
| <input type="checkbox"/> Guadalupanas | <input type="checkbox"/> _____ English |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> _____ Spanish |
| <input type="checkbox"/> Knights of Columbus * | <input type="checkbox"/> Website |
| <input type="checkbox"/> Lectors * | |
| <input type="checkbox"/> _____ English | |
| <input type="checkbox"/> _____ Spanish | |

** Indicates that you must complete training.*

Other Talents / Comments: _____

Signature _____ Date _____

TO BE COMPLETED BY OFFICE

Date Entered _____ Env. # _____ Ministry Contacted: Yes
 No