

# Saint Paul Catholic Church Registration Form



3305 Country Club Road  
New Bern, NC 28562  
Phone: 252.638.1984 Fax: 252.638.2144  
www.stpaulccnewbern.org



*In order that we may serve your needs better, we ask that you register with our Parish Family.  
Please complete this form as fully as possible and return it to the parish office .  
All information recorded is for parish purposes only and will not be shared with outside parties.  
We look forward in getting to know you!*

Family Name	_____
Address:	_____
City: State: Zip:	_____
Phone Number:	_____
E-Mail Address:	_____

## Head of Household

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Denomination: \_\_\_\_\_

Employer: \_\_\_\_\_ Special Needs: \_\_\_\_\_ Ethnic Background : (For Diocesan Records Only) \_\_\_\_\_

Marital Status: \_\_\_\_\_ Marriage Date: (if applicable) \_\_\_\_\_ Married by a Priest? \_\_\_\_\_

**Relationship:** \_\_\_\_\_ (Spouse, Parent, Other, Etc)

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Denomination: \_\_\_\_\_

Employer: \_\_\_\_\_ Special Needs: \_\_\_\_\_ Ethnic Background \*(For Diocesan Records Only) \_\_\_\_\_

Marital Status: \_\_\_\_\_ Marriage Date: (if applicable) \_\_\_\_\_ Married by a Priest? \_\_\_\_\_

## Dependent Children

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

***"We, though many, are one body in Christ."***

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## Sacraments

Name	Baptism	1st Holy Communion	Confirmation
	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____
	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____
	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____
	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____
	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____
	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____	Yes ___ No ___ Date _____



***We were all blessed with special gifts from God, please share those gifts with us.***

***Circle the ministry you and your family members are interested in.***

***The parish offers preparation.***

***We are a Spirit filled community that encourages everyone to take an active part in the Parish.***

### Worship and Spiritual Life

Extraordinary Ministers of the Eucharist    Eucharistic Ministers to the Sick and Homebound    Hospital Ministry  
 Readers    Altar Servers    Ushers    Old St. Paul Committee    Music Ministry    Altar Guild    Men's Fellowship  
 Eucharistic Adoration    Bereavement Reception Ministry    Charismatic Prayer Group

### Faith Enrichment Programs

Faith Formation Program    Come Home Ministry    RCIA    Marriage Preparation Team

### Human Concerns

Right to Life    Shelter Supper Ministry    Religious Community Services    MERCI Clinic  
 Eastern Pregnancy Information Center    Women's Craven County Jail Ministry    Low Flying Angels  
 St. Paul Men's Prison Ministry    Food & Clothing Ministry for Hispanics

### Parish Life

Knights of Columbus    Catholic Daughters of the Americas    Junior Catholic Daughters    St. Paul School  
 St. Paul Youth    Lending Library    Olive Branch Religious Articles Shoppe    Hispanic Ministry  
 Social Events for the Parish    Pride of St. Paul    Prayer Shawl Ministry    Survivors of Loved Ones



**Please include any other talents not included above or any other information you would like to share:**