

St. Patrick's Catholic Community
 Moody AFB, Georgia

Name _____ DOB _____ Religion _____ Active Duty ___ Retired ___ Civilian ___
 Sacraments: Baptism Yes No First Communion Yes No Confirmation Yes No

Spouse _____ DOB _____ Religion _____ Active Duty ___ Retired ___ Civilian ___
 Sacraments: Baptism Yes No First Communion Yes No Confirmation Yes No

Marriage Date: _____ Was the marriage performed in the Catholic Church? Yes No

Home Address _____

City _____ Zip _____ Home Phone _____

Home E-mail Address _____

Cell Phone _____ (name) _____ Duty Phone _____

Children living at home:			Baptism		First Communion		Confirmation	
Name	#	DOB	Yes	No	Yes	No	Yes	No
_____	#1	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	#2	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	#3	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	#4	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	#5	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	#6	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please list who in your family is interested in the following chapel ministries:

Parish Council _____ Lector _____ Eucharistic Minister _____
 Altar Server _____ CCD Teacher _____ RCIA _____
 Usher _____ Choir _____ Fellowship _____

Return completed form to Catholic Parish Coordinator