



St. Bruno Catholic Church Registration Form

(please print clearly)

Last Name _____ First Name _____ Middle I: _____ Mr. Mrs. Ms Miss Dr.

Street Address/Apt# _____ City _____ Zip _____

Home Phone _____ unlisted Business Phone _____ Fax _____

Email _____

Do you want envelopes or would you prefer to donate electronically? Envelopes Please mail me the electronic donation form

Mass Attendance: Sundays & Holydays Daily Mass Occasionally Seldom

	Head of House	Spouse	Child 1	Child 2	Child 3	Child 4
First Name						
Maiden Name						
Occupation						
Religion						
2 nd Language						
School Attending						
Present Grade						
Gender: M/F						
Date of Birth						
Baptized Date						
1 st Reconc. Date						
1 st Eucharist Date						
Confirmed Date						
Marriage Date*						
Church Wed: Y/N						
Religious Ed.						
Parish Ministries [†]						

* Please indicate if you're married in the Church, had a civil marriage, single, widowed, etc.

† Please indicate what, if any, Parish Ministries you are interested in: Lector, Eucharistic Minister, Minister for the Sick, Choir, Altar Server, Pastoral Council, Parish Council, Parish School, RCIA, Religious Education Program, Adult Faith Info, Life Teen, The Edge, etc.

FOR OFFICE USE ONLY: Date Registered: _____ Envelope # _____ Electronic Donation _____ 06/09