

Surname:	Env. #	Registration Date:
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For Office Use Only

Revised: Sept. 2013

Saint James the Just Parish Registration

Please Print

495 North Harrison Blvd, Ogden, UT 84404

801-782-5393

Your Mailing Name and Address:	Home Phone ()	Cell Phone ()
Emergency Contact Info (Name & Phone #):		
Family Email:		

Full Names of Household Members		Sacraments		Marital Status	Sex M/F
1. Name:	Career:	Date of Birth	Baptism? Y / N	Married? Y / N	
Family role:		Religion	<ul style="list-style-type: none"> • Month, Day & Year: • Church(City & State): 	Date: Married in the Church? Y / N Parish Name (City & State): Maiden name:	
			1 st Communion? Y / N Confirmation? Y / N		
2. Name:	Career:	Date of Birth	Baptism? Y / N	Married? Y / N	
Family role:		Religion	<ul style="list-style-type: none"> • Month, Day & Year: • Church (City & State): 	Date: Married in the Church? Y / N Parish Name (City & State): Maiden name:	
			1 st Communion? Y / N Confirmation? Y / N		
3. Name:	Talents:	Date of Birth	Baptism? Y / N	Married? Y / N	
Family role:		Religion	<ul style="list-style-type: none"> • Month, Day & Year : • Church (City & State): 	Date: Married in the Church? Y / N Parish Name (City & State): Maiden name:	
			1 st Communion? Y / N Confirmation? Y / N		
4. Name:	Talents:	Date of Birth	Baptism? Y / N	Married? Y / N	
Family role:		Religion	<ul style="list-style-type: none"> • Month, Day & Year : • Church(City & State): 	Date: Married in the Church? Y / N Parish Name (City & State): Maiden name:	
			1 st Communion? Y / N Confirmation? Y / N		

Do you wish to subscribe to our diocesan newspaper, The Intermountain Catholic?
YES NO. The parish is automatically assessed \$25 for each registered family, the cost of a yearly subscription. Your reimbursement would be greatly appreciated. Thank you.

Parish Financial Support: You will receive a packet of envelopes as soon as the new mailing cycle begins. Please contact the office if you would prefer not to receive offertory envelopes.

In grateful response to God for His generous gifts to me, I volunteer to return to God and my parish community my time and talent, as I am able, for Christ's work in His Church.

Please give the name of the family member interested in being contacted about serving in any of the ministries listed:

LITURGY/WORSHIP		RELIGIOUS ED.	CHRISTIAN ACTION	RECREATION/SOCIAL
Eucharistic Minister; Lector; Usher; Altar Server; Adorer; Music Ministry (voice/instrument); Cleaning/Ironing Altar linens; General cleaning (Church proper)	Tea Tea Su (Tu Bit	Catholic Jail Ministry Family Support (meals) Funeral Brunch Commi Ministry to Homebound Natural Family Plannin Parish Council Prayer Chain Pro-Life Committee	Coffee/Donuts (after Sun Masses) Knights of Columbus Prayer Group Scouting Programs Young Mother's Group Youth Group	

OTHER (if you have ideas for a parish ministry not listed here, use this opportunity to share them):

Full Names of Household Members			Sacraments	Marital Status	Sex M/F
5. Name:	Talents	Date of Birth	Baptism? Y / N • Month, Day & Year: • Church(City & State): 1 st Communion? Y / N Confirmation? Y / N	Married? Y / N Date: Married in the Church? Y / N Parish Name (City & State): Maiden name:	
Family role:		Religion			
6. Name:	Talents	Date of Birth	Baptism? Y / N • Month, Day & Year: • Church (City & State): 1 st Communion? Y / N Confirmation? Y / N	Married? Y / N Date: Married in the Church? Y / N Parish Name (City & State): Maiden name:	
Family role:		Religion			