HOLY REDEEMER BY THE SEA CATHOLIC PARISH

301 WEST KITTY HAWK ROAD, P.O. BOX 510, KITTY HAWK, NC 27949 ! PHONE: (252) 261-4700 FAX: (262) 261-1405

PLEASE PRINT Household (last name) Full Time Part Time		Office Use Only
Primary Address		Date Entered:
CityState	Zip	
Mailing Address	W500-1	
C'h	7.	Preferred Phone Number
City State E-Mail Address:	ZIP	Please check if you <u>do not</u> wish to receive Offertory Envelopes for your Church Support Donations.
\$2000000000000000000000000000000000000	RGENCY NO	DTIFICATION
n case of emergency whom should we notify:		
lame:	Relationshi	p:
ddress:		Phone:
City, State, Zip		Phone:
(Ministry Fo	orm #1) ADI	JLT IN HOUSEHOLD
Name	Last	G Male Title G Female Mr., Mrs., Ms, Dr., etc.
Goes By Name (nickname)	Bi	rth Date/
Occupation		ghest Grade/Degree achieved:
Retired: ☐ Yes ☐ No	Pr	eferred Phone ()
	A	ternate Phone: ()
Marital Status: ☐ Married ☐ Single ☐ Widov	wed □ Separ	ated 🗆 Divorced Race/Ethnic
Religion	Lo	ast Parish Affiliation
Language(s) Spoken	Lo	ıst Parish City/State
Sacraments Received: G Baptism	G First Rec	conciliation G First Eucharist
G Confirmation		
Previous Involvements/Ministries		
Community Affiliations		
Your parish community also wants to be of ser	rvice to vou.	Please let us know if you or your family have any
		hallenged)
Comments:		

CHILDREN AT HOME

(Any one 21 years or older should register as an adult. Please call the parish office for an additional form.)

! Name	Middle		g Male	G Fem	nale (Mi	nistr	y Form #7)
First Goes By Name (nickname	Middle	Last Birth Date	× 1141	_/	-	_/_	
Sacraments Received:	G Baptism	G First Reconcilio	Month ation		Day		Year
	G Confirmation	_ G First Eucharist _	D	ate			
School this child is curre	G Confirmation ently attending: _ Id to be involved in our		Date (Curren	t Grade	:	
Would you like your chi	ld to be involved in our : ld to be involved in our :	Sacramental Prepard Youth Group?	ation Pro	gram?	G Y G Y	'es 'es	g No g No
! Name	Middle	1	G Male	g Fen	nale (M	inisti	ry Form #8)
Goes By Name (nickname	e)	Birth Date		/		_/_	
Sacraments Received:	G Baptism	G First Reconcilio	ation		Day		Year
	G Confirmation	G First Eucharist _		are			
School this child is curre	ently attending:		Date C	Current	Grade	:	
Would you like your chil	d to be involved in our s d to be involved in our s	Sacramental Prepard	ation Prog	gram?	G Y G Y	es es	g No g No
! Name	Middle		G Male	G Femo	ale (Mir	nistry	Form #9)
Goes By Name (nickname	Middle (*)	Birth Date _		_/		_/_	
Sacraments Received:	G Baptism	G First Reconcilia	Month tion		Day		Year
	G Confirmation	_ G First Eucharist	Do	ate			
School this child is curre	ntly attendina:			Current	Grade	:	
Would you like your chil Would you like your chil	d to be involved in our S d to be involved in our S	Sacramental Preparc Youth Group?	ation Prog	gram?	G Y G Y	es es	g No g No
! Name	Middle	Least	G Male	g Fem	ale (Mi	inistr	y Form #10)
Goes By Name (nickname)	Birth Date _	4441-	_/	D	_/	
Sacraments Received:	G Baptism	G First Reconciliat	tion		Day		rear
	G Confirmation	G First Eucharist _	Date	ате			
School this child is curre	ntly attending:			Current	Grade		
Would you like your child Would you like your child	d to be involved in our S d to be involved in our Y	Sacramental Prepara Couth Group?	ition Prog	gram?	_		g No g No
						e e maille e ma	
Any comments that wou	uld be helpful for us to se	erve your children:					
			25 2555				

CHILDREN AT HOME

(Any one 21 years or older should register as an adult. Please call the parish office for an additional form.)

! Name	Middle		G Male	g Fem	ale (Minist	ry Form #3)
Goes By Name (nickname	Middle	Birth Date	Month	_/	/_	Vegr
Sacraments Received:	G Baptism	G First Reconcili	iation		–	rear
	G Confirmation			Date		
School this child is curre	ently attending: Id to be involved in our S		Date (Current	Grade:	
Would you like your chi	ld to be involved in our S ld to be involved in our S	Sacramental Prepare	ation Pro	gram?	G Yes G Yes	G No
Troola you like your crit	10 00 111101110111111111111111111111111	100111 01000			G 103	GNO
. Name			c Malo	c Form	alo (Minie	ry Form #4\
	Middle					
Goes By Name (nickname	2)	Birth Date	Month	_/	/	Year
Sacraments Received:	G Baptism	G First Reconcilio	ation	ato		
	G Confirmation	G First Eucharist		uie		
School this child is curre	G Confirmation ently attending:		Date	Current	Grade:	
Would you like your chil	d to be involved in our S	acramental Prepar	ation Pro	gram?	G Yes	g No
Would you like your chil	d to be involved in our Y	outh Group?			G Yes	g No
! Name	Middle		G Male	G Femo	le (Ministry	/ Form #5)
Goes By Name (nickname	Middle	Birth Date		/	/	
Sacraments Passivad:	C Rantism	C First Pagancilia	Month		Day	Year
sacraments Received.	G Baptism	G FIIST RECONCING		ate		
	G Confirmation	G First Eucharist _	Date			
School this child is curre	ntly attending:	1.10			Grade:	
Would you like your chil	d to be involved in our S d to be involved in our Y	acramental Prepard outh Group?	ation Prog			
		,				
I Name			c Mala	c Fome	nia (Minist	n. Form #4\
! Name	Middle	Last				
Goes By Name (nickname	Middle)	Birth Date _	Month	_/	/	Year
Sacraments Received:	G Baptism	G First Reconcilio	ation	ato		
	G Confirmation	G First Eucharist _		ale		
School this child is curre			Date	`urrent	Grade:	
Would you like your child	d to be involved in our S	acramental Prepara	ation Prog	gram?	G Yes	
Would you like your chil-	d to be involved in our Y	outh Group?			G Yes	g No
Any comments that wou	uld be helpful for us to se	erve your children:				
		500-514		***************************************		
			E 5			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

(Ministry Form #2) ADULT IN HOUSEHOLD

Name	G Male Title G Female Mr., Mrs., Ms, Dr., etc.
Goes By Name (nickname)	Birth Date/
Occupation	Highest Grade/Degree achieved:
Retired: ☐ Yes ☐ No	Preferred Phone ()
	Alternate Phone: ()
Marital Status: ☐ Married ☐ Single ☐ Widowed ☐ S	eparated 🗆 Divorced Race/Ethnic
Religion	Last Parish Affiliation
Language(s) Spoken	Last Parish City/State
Sacraments Received: G Baptism G First G Confirmation G Man	54.0
Previous Involvements/Ministries	
Community Affiliations	
Your parish community also wants to be of service to your special needs (e.g., handicapped, physically or mentall	
Comments:	
I give permission for my contact information to	be published in the parish roster.
Please <u>do not</u> publish my contact information in	the parish roster.
Signature Pri	nt Name

Ministries of Holy Redeemer by the Sea Parish

Our Creator has blessed each of us with gifts to be used to the service of others. Please review the Ministry List below and prayerfully consider which ministries work for you. If you have questions about any of the ministries please contact

Marian and Frank Sciacchitano (252) 261-6940 or fssbklyn@yahoo.com.

Appointed and Elected Councils	Liturgy
☐ Pastoral Council	☐ Altar Servers
☐ Finance Council	☐ Environment and Art
☐ Liturgical Council	☐ Eucharistic Minister
☐ Stewardship Committee	☐ Eucharistic Minister to the Sick
☐ Building Committee	☐ Parking Ministry
	☐ Pianists/Organists
Administration	☐ Hospitality Ministers: Ushers/Greeters
☐ Collection Counters	☐ Sound Ministry
☐ Physical Plant/Grounds	□ Lector
□ Publicity/Website	☐ Cantor
,	Adult Choir
Faith Formation	☐ Instrumentalist
☐ Small Group Faith Sharing	☐ Wedding Liturgy Preparation Committee
☐ Little Rock Scripture Study	☐ Children's Choir
☐ Rite of Christian Initiation of Adults	☐ Sacristan
☐ Catechists	☐ Living Nativity
☐ Children's Faith Formation	Living Nativity
☐ Sacramental Preparation	Peace & Justice
☐ Children's Liturgy of the Word	☐ Truck-It Ministry
☐ Vacation Bible School	☐ Peace & Justice Coalition
	☐ Interfaith Community Outreach (ICO)
Parish Life	□ Food Pantry
☐ Reception Host/Hostess Committee	☐ Legislative Advocacy
☐ Knights of Columbus	☐ English as a Second Language (ESL)
☐ Ladies by the Sea	☐ Blood Drive
☐ Crafty Ladies	☐ Colony Ridge Nursing and Rehab Center
☐ Men's Club	☐ JustFaith
☐ Welcoming Newcomers	☐ Respect for Life
	☐ Parish Nursing
Hispanic Ministry	☐ Food for Thought
☐ Latino Faith Formation	Peace Garden
☐ Cultural	☐ Ruthie's Kitchen
— Cultului	Li Rutille 8 Kitchen
Young Adults	Special Talents You Can Offer:
☐ Planning Team	
8	
N	
Name:	
Address:	Evening Phone:
	Email:
Do you prefer contact by phone or email?	