

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 ☐

Primary Address _____

City _____ State _____ Zip _____

Mailing Address _____

City _____ State _____ Zip _____

E-Mail Address: _____

Office Use Only

Date Entered: _____

Preferred Phone Number _____

☐ Please check if you do not wish to receive Offertory Envelopes for your Church Support Donations.

EMERGENCY NOTIFICATION

In case of emergency whom should we notify:

Name: _____

Relationship: _____

Address: _____

Preferred Phone: _____

City, State, Zip _____

Alternate Phone: _____

(Ministry Form #1) ADULT IN HOUSEHOLD

Name _____ G Male Title _____
First Middle Last G Female Mr., Mrs., Ms, Dr., etc.

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Occupation _____ Highest Grade/Degree achieved: _____

Retired: ☐ Yes ☐ No

Preferred Phone (_____) _____

Alternate Phone: (_____) _____

Marital Status: ☐ Married ☐ Single ☐ Widowed ☐ Separated ☐ Divorced Race/Ethnic _____

Religion _____ Last Parish Affiliation _____

Language(s) Spoken _____ Last Parish City/State _____

Sacraments Received: G Baptism _____ Date _____ G First Reconciliation _____ Date _____ G First Eucharist _____ Date _____

G Confirmation _____ Date _____ G Marriage _____ Date _____

Previous Involvements/Ministries _____

Community Affiliations _____

Your parish community also wants to be of service to you. Please let us know if you or your family have any special needs (e.g., handicapped, physically or mentally challenged). _____

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 _____ G Male G Female **(Ministry Form #7)**
First Middle Last

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Sacraments Received: G Baptism _____ G First Reconciliation _____
Date Date

G Confirmation _____ G First Eucharist _____
Date Date

School this child is currently attending: _____ Current Grade: _____

Would you like your child to be involved in our Sacramental Preparation Program? G Yes G No

Would you like your child to be involved in our Youth Group? G Yes G No

! Name _____ G Male G Female **(Ministry Form #8)**
First Middle Last

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Sacraments Received: G Baptism _____ G First Reconciliation _____
Date Date

G Confirmation _____ G First Eucharist _____
Date Date

School this child is currently attending: _____ Current Grade: _____

Would you like your child to be involved in our Sacramental Preparation Program? G Yes G No

Would you like your child to be involved in our Youth Group? G Yes G No

! Name _____ G Male G Female **(Ministry Form #9)**
First Middle Last

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Sacraments Received: G Baptism _____ G First Reconciliation _____
Date Date

G Confirmation _____ G First Eucharist _____
Date Date

School this child is currently attending: _____ Current Grade: _____

Would you like your child to be involved in our Sacramental Preparation Program? G Yes G No

Would you like your child to be involved in our Youth Group? G Yes G No

! Name _____ G Male G Female **(Ministry Form #10)**
First Middle Last

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Sacraments Received: G Baptism _____ G First Reconciliation _____
Date Date

G Confirmation _____ G First Eucharist _____
Date Date

School this child is currently attending: _____ Current Grade: _____

Would you like your child to be involved in our Sacramental Preparation Program? G Yes G No

Would you like your child to be involved in our Youth Group? G Yes G No

Any comments that would be helpful for us to serve your children:

CHILDREN AT HOME

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

! Name _____ G Male G Female **(Ministry Form #3)**
First Middle Last

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Sacraments Received: G Baptism _____ G First Reconciliation _____
Date Date

G Confirmation _____ G First Eucharist _____
Date Date

School this child is currently attending: _____ Current Grade: _____

Would you like your child to be involved in our Sacramental Preparation Program? G Yes G No

Would you like your child to be involved in our Youth Group? G Yes G No

! Name _____ G Male G Female **(Ministry Form #4)**
First Middle Last

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Sacraments Received: G Baptism _____ G First Reconciliation _____
Date Date

G Confirmation _____ G First Eucharist _____
Date Date

School this child is currently attending: _____ Current Grade: _____

Would you like your child to be involved in our Sacramental Preparation Program? G Yes G No

Would you like your child to be involved in our Youth Group? G Yes G No

! Name _____ G Male G Female **(Ministry Form #5)**
First Middle Last

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Sacraments Received: G Baptism _____ G First Reconciliation _____
Date Date

G Confirmation _____ G First Eucharist _____
Date Date

School this child is currently attending: _____ Current Grade: _____

Would you like your child to be involved in our Sacramental Preparation Program? G Yes G No

Would you like your child to be involved in our Youth Group? G Yes G No

! Name _____ G Male G Female **(Ministry Form #6)**
First Middle Last

Goes By Name (nickname) _____ Birth Date _____ / _____ / _____
Month Day Year

Sacraments Received: G Baptism _____ G First Reconciliation _____
Date Date

G Confirmation _____ G First Eucharist _____
Date Date

School this child is currently attending: _____ Current Grade: _____

Would you like your child to be involved in our Sacramental Preparation Program? G Yes G No

Would you like your child to be involved in our Youth Group? G Yes G No

Any comments that would be helpful for us to serve your children:

(Ministry Form #2) ADULT IN HOUSEHOLD

Name _____ First Middle Last G Male
G Female Title _____ Mr., Mrs., Ms, Dr., etc.

Goes By Name (nickname) _____ Birth Date _____/_____/_____
Month Day Year

Occupation _____ Highest Grade/Degree achieved: _____

Retired: ☐ Yes ☐ No

Preferred Phone (_____) _____

Alternate Phone: (_____) _____

Marital Status: ☐ Married ☐ Single ☐ Widowed ☐ Separated ☐ Divorced Race/Ethnic _____

Religion _____ Last Parish Affiliation _____

Language(s) Spoken _____ Last Parish City/State _____

Sacraments Received: G Baptism _____ Date G First Reconciliation _____ Date G First Eucharist _____ Date

G Confirmation _____ Date G Marriage _____ Date

Previous Involvements/Ministries _____

Community Affiliations _____

Your parish community also wants to be of service to you. Please let us know if you or your family have any special needs(e.g., handicapped, physically or mentally challenged). _____

Comments: _____

_____ I give permission for my contact information to be published in the parish roster.

_____ Please do not publish my contact information in the parish roster.

Signature

Print 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

- ☐ Pastoral Council
- ☐ Finance Council
- ☐ Liturgical Council
- ☐ Stewardship Committee
- ☐ Building Committee

Administration

- ☐ Collection Counters
- ☐ Physical Plant/Grounds
- ☐ Publicity/Website

Faith Formation

- ☐ Small Group Faith Sharing
- ☐ Little Rock Scripture Study
- ☐ Rite of Christian Initiation of Adults
- ☐ Catechists
- ☐ Children's Faith Formation
- ☐ Sacramental Preparation
- ☐ Children's Liturgy of the Word
- ☐ Vacation Bible School

Parish Life

- ☐ Reception Host/Hostess Committee
- ☐ Knights of Columbus
- ☐ Ladies by the Sea
- ☐ Crafty Ladies
- ☐ Men's Club
- ☐ Welcoming Newcomers

Hispanic Ministry

- ☐ Latino Faith Formation
- ☐ Cultural

Young Adults

- ☐ Planning Team

Liturgy

- ☐ Altar Servers
- ☐ Environment and Art
- ☐ Eucharistic Minister
- ☐ Eucharistic Minister to the Sick
- ☐ Parking Ministry
- ☐ Pianists/Organists
- ☐ Hospitality Ministers: Ushers/Greeters
- ☐ Sound Ministry
- ☐ Lector
- ☐ Cantor
- ☐ Adult Choir
- ☐ Instrumentalist
- ☐ Wedding Liturgy Preparation Committee
- ☐ Children's Choir
- ☐ Sacristan
- ☐ Living Nativity

Peace & Justice

- ☐ Truck-It Ministry
- ☐ Peace & Justice Coalition
- ☐ Interfaith Community Outreach (ICO)
- ☐ Food Pantry
- ☐ Legislative Advocacy
- ☐ English as a Second Language (ESL)
- ☐ Blood Drive
- ☐ Colony Ridge Nursing and Rehab Center
- ☐ JustFaith
- ☐ Respect for Life
- ☐ Parish Nursing
- ☐ Food for Thought
- ☐ Peace Garden
- ☐ Ruthie's Kitchen

Special Talents You Can Offer:

Name: _____

Day Phone: _____

Address: _____

Evening Phone: _____

Email: _____

Do you prefer contact by phone or email? _____ Best time to reach you? _____