



250 Kraft Street + Berea, OH 44017
Office 440-243-3877
www.stmaryberea.org

Dear New Parishioner,

We are pleased that you have decided to register with St. Mary Catholic Church and would like to take this opportunity to thank you for being a member of our parish. Hopefully you will find that St. Mary liturgies and sacraments meet your needs.

We would like to encourage you take an active role in the various ministries and programs that we offer, or in which you might have an interest. Some of the areas that may be of interest to you might include becoming a Lector or Eucharistic Minister, joining our Music Ministry either vocally or instrumentally, serving on one of our commissions, offering to teach in our Parish School of Religion, to name just a few. Please look around our website to see what's going on in the Parish.

Once you have completed the registration form please return to us at the following postal address:

St Mary Parish
New Member Registration
250 Kraft Street
Berea, Ohio 44017

Other ways to return the completed registration form are: by fax: (440) 891-9417, placed in the weekly collection basket marked – “New Member Registration” or by scanning and emailing to our parish staff at jabraham1@stmaryberea.org

Once received and processed, we will forward a welcome packet that will include contribution envelopes. As you can imagine, we incur many expenses in running the parish so I would ask you to please be as generous as you can in your support. You should also be aware that it usually takes a couple of months for you to start receiving pre-printed envelopes.

Again, I am pleased that you have chosen to be a part of St. Mary parish Family and look forward to your active participation.

Sincerely,

Rev. John P. Singler

Rev. John P. Singler
Pastor

Saint Mary Parish Registration

Date ____/____/____ (For Office Use Only)
Envelope Number _____

INSTRUCTIONS: 1) Please print 2) Fill in as completely as possible 3) Return to Parish Office by mail, collection basket, or in person
The information provided by you on this form is used by the staff of Saint Mary Parish to serve you better. **All information is kept confidential.** If you have any comments, please add them to the reverse side of this sheet. If you have any questions, please feel free to call the Saint Mary Parish Office at 440-243-3877.

Family Last Name		Are you registered at another church? <input type="checkbox"/> Yes <input type="checkbox"/> No Parish: _____		
Primary Residence Street Address		Seasonal Residence Date ____/____/____ to ____/____/____ Street Address		
City	Zip	City	Zip	Phone () _____
Home Phone () _____	Cell Phone () _____	Family E-Mail Address		

HEAD OF HOUSEHOLD		SPOUSE	
Name	Maiden Name	Name	Maiden Name
Date of Birth ____/____/____		Date of Birth ____/____/____	
Education Completed <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Technical Field of Study: _____		Education Completed <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Technical Field of Study: _____	
Employer Name: _____ Position/Type of Work: _____ <input type="checkbox"/> Retired <input type="checkbox"/> Self-Employed <input type="checkbox"/> Unemployed		Employer Name: _____ Position/Type of Work: _____ <input type="checkbox"/> Retired <input type="checkbox"/> Self-Employed <input type="checkbox"/> Unemployed	
Religion Denomination _____ Baptized <input type="checkbox"/> Yes <input type="checkbox"/> No First Communion <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmation <input type="checkbox"/> Yes <input type="checkbox"/> No Convert <input type="checkbox"/> Yes <input type="checkbox"/> No Are you interested in becoming Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No		Religion Denomination _____ Baptized <input type="checkbox"/> Yes <input type="checkbox"/> No First Communion <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmation <input type="checkbox"/> Yes <input type="checkbox"/> No Convert <input type="checkbox"/> Yes <input type="checkbox"/> No Are you interested in becoming Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Marital Status Single <input type="checkbox"/> Married <input type="checkbox"/> Date ____/____/____ Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Date ____/____/____ Were you married by a Priest? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Church _____		Marital Status Single <input type="checkbox"/> Married <input type="checkbox"/> Date ____/____/____ Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Date ____/____/____ Were you married by a Priest? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Church _____	

OTHER FAMILY MEMBERS (UNDER 25 AND LIVING WITH YOU)

First name (and last if different from family name)	Birth Date	Baptized	First Communion	Confirmation	Present School/Grade or Employer
1	____/____/____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	____/____/____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	____/____/____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	____/____/____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	____/____/____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	____/____/____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

<p>Please identify any special ministry need in your household (e.g., marriage validation, annulment, nursing home patient, homebound person, special needs person, etc.)</p>	<p>Which ministries were you or your household members involved in at your previous parish?</p>
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Please identify any ministries you or your household members would have an interest in at Saint Mary's (e.g., Choir, Lector, Eucharistic Minister, Usher, PSR Teacher, etc.) ?

Do any of your relatives/friends parishioners belong to our Cluster parishes?

Yes No

St. Adalbert

St. Mary of the Falls

Do you know anyone wishing to join the Catholic Church?

Yes No

Would you like someone from Saint Mary's to contact them?

Yes No

Name of the Person: _____

Phone: _____

May we give you as a reference? Yes No

TELL US A LITTLE ABOUT YOURSELF

What are some of your interests/hobbies?

What are some of your personal skills? (e.g., yard work, construction, home repair, computer applications, etc.)

What are you involved in at work/school that could be offered in our parish?

What made you decide to join Saint Mary Parish? (e.g., proximity to home, friendliness of parishioners, etc.)

Additional Comments

THANK YOU FOR YOUR INPUT — WELCOME TO SAINT MARY PARISH