

## ST. JOHN VIANNEY PARISH ---- Registration Form

*St. John Vianney parish, a Christian Community in the Roman Catholic tradition, motivated by the love of God, provides opportunities in worship, education, ministry and outreach for its parishioners and the community at large.*

*--- Mission Statement of St. John Vianney Parish*

Date: \_\_\_\_\_ Family / Account Name (Please print) : \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Family email address: \_\_\_\_\_

Online Giving: Yes / No      To register for Online Giving: [saintjohnvianneyhawaii.org/giving](http://saintjohnvianneyhawaii.org/giving)      Sunday Envelopes: Yes / No

Your Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Sex: M F      Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Sacraments Received:	Baptism: Yes / No    Date: _____	First Communion: Yes / No    Date: _____
	Confirmation: Yes / No    Date: _____	Catholic Matrimony: Yes / No    Date: _____

Spouse Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Sex: M F      Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Sacraments Received:	Baptism: Yes / No    Date: _____	First Communion: Yes / No    Date: _____
	Confirmation: Yes / No    Date: _____	Catholic Matrimony: Yes / No    Date: _____

Completion and submission of this registration form grants St. John Vianney Parish your permission to share this information with the different departments and Stewardship groups within the organization. All information will remain confidential within St. John Vianney organization.

**PLEASE COMPLETE REVERSE SIDE**

**Names of Others Living with You:**

Name	Relationship	Date of Birth	If in school Grade Level	Baptized	First Communion	Confirmation
				Yes/No Date _____	Yes/No Date _____	Yes/No Date _____
				Yes/No Date _____	Yes/No Date _____	Yes/No Date _____
				Yes/No Date _____	Yes/No Date _____	Yes/No Date _____
				Yes/No Date _____	Yes/No Date _____	Yes/No Date _____
				Yes/No Date _____	Yes/No Date _____	Yes/No Date _____
				Yes/No Date _____	Yes/No Date _____	Yes/No Date _____

For additional family members please attach their information on a separate page. All members linked to this account will be provided with a single financial statement.

Please check each of the areas below that may be of interest to you or a family member or which you would like additional information. **Checking any of the areas does not commit you to a particular activity.**

<input type="checkbox"/> Baptism Information	Assisting at Liturgies:	Other Stewardship Programs:	
<input type="checkbox"/> Religious Education	<input type="checkbox"/> Lector	<input type="checkbox"/> Parish Pastoral Council	<input type="checkbox"/> Parish/School Office Volunteer
<input type="checkbox"/> Catechist or Aid	<input type="checkbox"/> Eucharistic Minister	<input type="checkbox"/> St. Vincent de Paul Society	<input type="checkbox"/> F.A.C.E. Participant
<input type="checkbox"/> Becoming a Catholic/RCIA	<input type="checkbox"/> Environment Mister	<input type="checkbox"/> Prison Ministry	<input type="checkbox"/> Bereavement Committee
	<input type="checkbox"/> Sacristan	<input type="checkbox"/> Family Promise Volunteer	<input type="checkbox"/> Sodality of Our Blessed Lady
	<input type="checkbox"/> Usher/Hospitality Minister	<input type="checkbox"/> Knights of Columbus	<input type="checkbox"/> SJV Seniors (Young Hearts)
	<input type="checkbox"/> Altar Server	<input type="checkbox"/> Liturgy Commission	<input type="checkbox"/> Service Commission
	<input type="checkbox"/> Music Minister	<input type="checkbox"/> Building Commission	<input type="checkbox"/> Blood Bank Donor
		<input type="checkbox"/> School Information	<input type="checkbox"/> Boy Scouts

**Thank you! Please return to the Parish Office**

**St. John Vianney Parish, 920 Keolu Dr., Kailua, HI 96734 Ph: (808) 262-8317**

**For Official use only:** Family ID #: \_\_\_\_\_ Date entered into PDS: \_\_\_\_\_ Initials: \_\_\_\_\_

Date parishioner's request for information sent to various committees: \_\_\_\_\_

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