

Christ the King Parish

Office Use Only:	
ID# _____	Registry Date _____

630 Second Street ▪ Leechburg PA 15656 Phone 724-845-8191 / Fax: 7 24-845-5480

Last Name _____ First Name _____ Spouse _____

Street _____ City _____ State _____ Zip _____

Phone (_____) _____ Unlisted Y/N _____ Work: _____ Cell Phone _____

E-Mail: _____ Fax _____

Mass Attendance Weekly Often Occassionally Seldom Never **Marrital Status:** Single Widowed Separated Divorced

	Head of House	Spouse	Child	Child	Child	Child
First Name						
Middle Name						
Last Name						
Maiden Name						
Gender						
Religion						
Occupation						
Employer						
Grade						
School Attending						
Date of Birth						
Baptism*						
1st Communion*						
Confirmation*						

DIRECTIONS TO YOUR HOME: _____

MINISTRIES: *Please check areas of interest:*

- | | | |
|---|--|--|
| <input type="checkbox"/> RCIA | <input type="checkbox"/> Lector | <input type="checkbox"/> Altar Server |
| <input type="checkbox"/> Choir/Cantor/Organist | <input type="checkbox"/> Hospitality/Usher | <input type="checkbox"/> Eucharistic Minister |
| <input type="checkbox"/> Adult Formation Education | <input type="checkbox"/> Faith Formation/Religious Education | |
| <input type="checkbox"/> Finance Council | <input type="checkbox"/> Youth Ministry | <input type="checkbox"/> Vacation Bible School |
| <input type="checkbox"/> Funeral Luncheons | <input type="checkbox"/> Fund Raisers | <input type="checkbox"/> Collection Counter |
| <input type="checkbox"/> Children's Liturgy of the Word | | |