Our Lady of the Lak		New Parishioner?				
Date Registered**:						
Household Name:			**Member ID number:			
	ress:City:		State:	Zip Code:		
Home Phone:						
NOTE: You do not have to be Catholi	ic to be a registered member	of Our Lady of the Lake Parish. A	ALL ARE WELCOM	ſE!		
	Head of Househ	old		Spouse (maiden name)		
Name (First, Middle Initial)						
Religion						
Date of Birth/City						
Baptized? (Where)						
First Communion?						
Confirmation?						
Cell Phone/Work Phone		/				
Employer						
Occupation/Talent						
Married: Date of Marriage	e: Witness	sed by a Catholic Priest? Yes:	No:	Church/City		
Joint Household (unmarried):	Single: Wide	owed: Divorced:	Annulled:	_		
Children Living at Home - 1	If additional space is need	ed, please use another sheet.				
	Child 1	Child 2		Child 3	Child 4	
Full Name						
M/F						
Date of Birth/City						
Baptized? Church/City						
First Communion?						
Confirmation?						
School/Grade						
Registered and active parish member	ership is required for a minim	um of 6 months to be considered for	or marriage or to obt	ain a letter of sponsorship to	o be a Godparent/Sponsor.	
Are you interested in serving in a	any parish ministries?	Eucharistic Minister Lea	ctor (Reader)	Hospitality/Greeter	Sacristan Choi	

Are you interested in serving in any parish ministries? __Eucharistic Minister __Lector (Reader) ___ Hospitality/Greeter ___Sacristan ___Choir __Catechist (Religious Ed Teacher) ___ Classroom Aide ___ Thrift Shop Volunteer __Care & Concern ___Welcoming Committee __Altar & Rosary Group (women) ___Knights of Columbus (men) ___Altar Server (grade 4 and up) ___Liturgy Committee