



New Parishioner Registration Form

211 East Division Street; PO Box 86 † River Falls, WI 54022
 Phone: 715.425.1870 † Fax: 715.425.1871 † Email: recept@stbparish.com
 Office Hours: Monday – Thursday 9:00 am – 4:00 pm, Friday 9:00 am to Noon

Family Last Name	
Street Address	
City, State, Zip	
Primary Phone Number	
Primary Email Address	
Previous Parish	
<i>We will not distribute your phone number or email address</i>	

Welcome to St. Bridget!

We are honored you have chosen to journey with us. So that we may serve you better, please fill out this registration form clearly and completely and return to the church office. Please email, call or stop by the office with any questions.

Registrant Name	
First & Middle:	M F
Preferred Name:	
Date of Birth:	
Occupation:	
Race/Ethnicity: <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> African American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Unknown	
Religion:	
Marital Status: <input type="checkbox"/> Single; never married <input type="checkbox"/> Married - Both Catholic <input type="checkbox"/> Widowed <input type="checkbox"/> Married - Interfaith <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	
Baptized	<input type="checkbox"/> Yes <input type="checkbox"/> No
Church of Baptism	
City/State of Baptism	
First Communion	<input type="checkbox"/> Yes <input type="checkbox"/> No
Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No

Spouse Name (if applicable)	
First & Middle:	M F
Preferred Name:	
Date of Birth:	
Occupation:	
Race/Ethnicity: <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> African American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Unknown	
Religion:	
Marital Status: <input type="checkbox"/> Single; never married <input type="checkbox"/> Married - Both Catholic <input type="checkbox"/> Widowed <input type="checkbox"/> Married - Interfaith <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	
Baptized	<input type="checkbox"/> Yes <input type="checkbox"/> No
Church of Baptism	
City/State of Baptism	
First Communion	<input type="checkbox"/> Yes <input type="checkbox"/> No
Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No

Children Living at Home or in College (Please list additional children on the back of this form)							
First & Middle Name	Last Name (if different)	Gender	Date of Birth	Baptized	Church & City/State of Baptism	Comm.	Confirm.
		M / F	/ /	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
		M / F	/ /	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
		M / F	/ /	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
		M / F	/ /	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N

How would you like to support St. Bridget
<input type="checkbox"/> Electronic Contribution/ACH <input type="checkbox"/> Weekly Envelopes

Would you like to receive the Diocesan Catholic Herald?
<input type="checkbox"/> Yes <input type="checkbox"/> No
Please note: this publication does cost the parish \$20 if no payment is not sent by parishioner. It is also available online.

Would you like additional information about the following:
Parish School? <input type="checkbox"/> Yes: ___ PreK ___ K – 8 th Grade Faith Formation? <input type="checkbox"/> Yes: ___ PreK ___ K – 5 th ___ MS ___ HS

St. Bridget Invitation to Ministry

This form provides an overview of the ministries, outreach programs, and social connections that form the core of St. Bridget Catholic Church. We invite you to prayerfully consider joining us, as we come together to live, grow and serve our faith community.

Please check any areas below you would like to serve in and someone from our parish community will be in contact with you.

Family Name: _____ Email: _____ Phone: _____

Is there something else you would like to do that is not mentioned?

Liturgical Ministries

Altar Server (grade 5 & up)	Eucharistic Minister of Care*	Greeter
Adult Altar Server	Reader	Liturgical Decorating
Usher	Video Ministry	Sacristy Care
Eucharistic Minister	Projection Ministry	

Music Ministries

Cantor	Adult Choir	Musician
Praise Team Band/Singer	Youth Choir	

Faith Formation and Education Ministries

Faith Formation Catechist*	Vacation Bible School*	Parish School Aide*
Faith Formation Meal Volunteer*	FOCCUS Marriage Prep.	Parish School Substitute Teacher*
Sunday Preschool Assistant*	RCIA Sponsor	Jail Ministry*

Hospitality Ministries

Donut Ministry	Hospitality Committee	Childcare*
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Church Maintenance

Indoor Plant Care	Outside Gardener	
Church Care	Skilled Worker-carpentry, painting, plumbing	

Other Ministry Opportunities

Prayer Shawl Ministry	Prayer Partners	Martha's Quilt Group
SCRIP Team	Prayer Line	

Parish Committees and Organizations

Parish Council (elected)	Youth Discipleship Committee	Knights of Columbus
Finance Council (appointed)	Facilities Committee	Catholic Watchmen
Liturgy Committee	School Executive Committee	Men's Group
Social Justice Committee	Strategic Planning Committee	Family Ministry
Spirituality Committee	Women's Prayer Meeting	

* Indicates background check and participation in Basic Adult Safe Environment (BASE) training is required.