

## The Church of Saint Nicholas

## **New Parishioner Registration**

412 West 4th Street, Carver, MN 55315 952-227-4000 <u>www.stnicholascarver.org</u>

\*\* Please drop in an envelope in the collection basket, e-mail to info@gachaska.org, or mail to The Church of Saint Nicolas, c/o The Church of the Guardian Angels, 215 W. 2<sup>nd</sup> Street, Chaska, MN 55318.

General Information	Date of registration:
Family Last Name:	Address:
City: Zip Code:	Phone Number:
E-mail Address:	How Did You Find Out About Us?
Do you want to use: Envelopes	or Electronic Giving
	Head of Household
Preferred Title: Mr Mrs Ms	Religion/Denomination:
First Name:	Last Name:
Birth date: Baptized? Yes	No
Church of Baptism:	City/State:
First Communion: Yes No	Confirmation: Yes No
Marital Status: Single Married	Widowed Separated Divorced Annulled
Date of Marriage: Married by:	Priest or Deacon Other Minister Civil Magistrate
Occupation:	Place of Employment:
Work Phone:	Work E-mail address:
What sort of time and talent do you wish to	share with us:
	<u>Spouse</u>
Preferred Title: Mr Mrs Ms	Religion/Denomination:
First Name:	Last Name:
Birth date: Baptized? Yes	
Church of Baptism:	Citv/State:

First Communion: Ye	es	No	_ Confirmatio	n: Yes _	No	)	
First Communion: Ye	es	No	_ Confirmatio	n: Yes _	No	)	
Marital Status: Single	e M	arried	Widowed _	S	eparated	Divorced	Annulled
Date of Marriage:		_ Married l	oy: Priest or De	eacon _	Othe	er Minister	Civil Magistrate
Occupation:				Plac	e of Emplo	oyment:	
Work Phone:				Wor	k E-mail a	ddress:	
What sort of time ar	nd talent do	you wish	to share with u	ıs:			
			<u>Depende</u>	nt Chi	Ιd		
First Name:			-				
Gender: Male							
Special Needs? Pleas							
							es No
			Donondo	nt Chi	اما		
First Name:			<u>Depende</u>				
Gender: Male							
Special Needs? Pleas							es No
							.3140
endren or baptism					City/3ta		
			<u>Depende</u>	nt Chi	<u>ld</u>		
First Name:				Last	Name:		
Gender: Male	Female	E	Birth date:				
Special Needs? Pleas	se Explain:						
Baptized? Yes	_ No	First Com	munion: Yes	No	) C	onfirmation: Ye	es No
Church of Baptism: _					City/Sta	nte:	