



Our Lady of Mount Carmel Church

Welcome! | Parish Registration Form

Please fill out this form as completely as possible and return it to the Parish Office.
1300 East Valley Road, Santa Barbara, CA 93108
Email: info@mtcarmelsb.com Phone: 805.969.6868

Family Name: _____

Date of Registration: _____

Home Address: _____

Would you like donation envelopes sent to you? Y N

City, State & Zip: _____

Marital Status: Married Single Widow Divorced

Home Phone: _____

If married, were you married in the Catholic Church? Y N

Name	Relation	Cell		E-Mail	
Name of each person who lives at this address. Write first and middle name. Include last name if different from above.	Head of family first, then note relation of each person to head of the family.				
	Head				
Children living in household	Relation	DOB	Baptism	1st Comm.	Confirmation
Comments:					

Which Mass do you attend most regularly? Saturday 4:30pm Sunday 8:00am Sunday 10:00am Sunday 12:00 Noon

Are you/your family currently volunteering your time & talents to any parish group? Which group(s)? _____

Do you have any special talents you would like to share with the parish? _____

Do you/your family have any interest in serving the parish in any of the following:

- Usher
- Altar Server
- Finance Council
- Music Ministry
- Lector
- Hospitality
- Religious Education
- Buildings & Grounds
- Eucharistic Minister
- Pastoral Council
- Youth Ministry
- Publicity / Social Media

Would you like the parish to provide any of these additional opportunities for worship?

- Bible Study
- Guest Lecturers
- Retreats
- Concerts

Other: _____