

PLEASE RETURN BY: MONDAY, JANUARY 21, 2019

2019 Parish Directory Data Sheet

Member(s) of: Holy Trinity: _____ St. Gregory: _____

Family Name: _____

First Name: _____

Spouse/Significant Other: _____

Children under age 18:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

***Children over age 18:**

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

*Parents, please encourage your children to register as a parishioner with the parish office after they turn 18.

Address (Please, include PO Box with the physical address):

Phone Number to be used in the 2019 Parish Directory: _____

Additional phone numbers (work or cell) the office may use to contact you:

_____ belongs to _____

_____ belongs to _____

_____ belongs to _____

_____ belongs to _____

****Email:** _____

****Would you like to receive information from the parish office on events or important information by email?**

Yes: _____ No: _____

Contributions:

Would you like information about establishing an automatic withdrawal (twice a month) from your bank account for parish support in place of weekly envelope contributions?

Yes: _____ No: _____

Thank you for helping to update our records in the Parish Offices!