

Hospitality

Our Lady of Grace & St. Joseph Church 400 Willow Avenue * Hoboken, NJ 07030 Phone: 201-659-0369 * Fax: 201-659-0221 Email: olgrace@optonline.net www.olghoboken.com

Complete and return this form to the parish office to register or to update any information already in parish records. All information recorded is for parish purposes only and will not be shared with outside parties.

Information can be entered directly into the PDF. Save the PDF to your computer and email it to the parish rectory. You may also click the "Print Form" button in the top right corner if you wish to complete the form by hand and fax or mail it in.

	in.										
Family name:				Toda	y's date:			New U	odate		
Street:				Community: Our Lady of Grace St. Joseph							
City:				Member of parish since (year joined):							
State:	Zip o	ode:									
Home phone:											
Members of household											
Name	Relationship (husband, wife, son, daughter, etc.)	Birthdate	Occupation	n/School	Cell	l phone		Email			
Ministry											
We urge each parishione thought to the following							sehold to give	e serious			
Altar Server											
Bereavement Ministe					Group						
Catechist	Catechist				na						
Choir		RCIA									
Divorced & Remarried	ivorced & Remarried				ts						
Eucharistic Minister											
Festivals											
Leader of Song				Young Adults							

Youth Minister

	n ental Prepara nildren aged 5-16 year		•	st anv	one interested in rece	eivina th	ne following:					
Name:	march agea 3 10 year		☐ Baptism ☐ Confirmation		Holy Eucharist Matrimony	Nar				Baptism Confirmation		Holy Eucharist Matrimony
Name:			☐ Baptism ☐ Confirmation		Holy Eucharist Matrimony	Nar	me:			Baptism Confirmation		Holy Eucharist Matrimony
Stewar	dship											
A parishior	ner is called to serve th	ne con	nmunity. Please list ar	ny me	mber of your househ	old that	wishes to aid the p	oarish a	nd his or h	er specific talents.		
Name:												
Areas of t	alent that you woul	ld be	willing to aid the p	arish	in:							
	Art		Data Entry		Flower Arranging		Health Care		Teaching			
			Decorating				Office Support		Tech Sup	nort		
	3		Electrical	Г	•		Photography		Telephon	•		
			Electronics		3		Plumbing		•	•		
	3	_			. ,		3			ck/homebound		
	3		Event Organizatio		3		Sewing		Woodwo	rking		
	Crafts		Faith Sharing		Music		Sports		Writing			
Please inc	clude any other tale	nts no	ot included above o	or an	y other information	n you w	ould like to share	e:				
Namo												
Name:		اما ام	مرمطة لمنم معسمنالنين	حام اسم	:							
Areas of t	alent that you woul	a be	willing to aid the p	arısn	in:							
	Art		Data Entry		Flower Arranging		Health Care		Teaching			
	Baking		Decorating		Fund Raising		Office Support		Tech Sup	port		
	Bookkeeping		Electrical		Gardening		Photography		Telephor	ing		
Г	Cleaning		Electronics		Hospitality		Plumbing			ck/homebound		
	3		Event Organizatio		. ,		Sewing		Woodwo			
	Crafts		-	Г	•		Sports		Writing	g		
Please inc	clude any other tale	nts no	ot included above o	or an	y other information	ı you w	ould like to share	e:				
Г												
Name:												
Areas of t	alent that you woul	ld be	willing to aid the p	arish	in:							
	Art		Data Entry		Flower Arranging		Health Care		Teaching			
	Baking		Decorating		Fund Raising		Office Support		Tech Sup	port		
	•		Electrical		3		Photography		Telephor	•		
Г			Electronics		•		Plumbing			ck/homebound		
	3				' '		•					
			Event Organizatio				Sewing		Woodwo	iking		
	Crafts		Faith Sharing		Music		Sports		Writing			
Please inc	clude any other tale	nts no	ot included above of	or an	y other information	ı you w	ould like to share	e:				
L												
Other in	formation you wo	ould l	like to share:						For Of	fice Use Only:		
										lember		
									Family	ID En	velop	oes