

Let us know your Proficient/Certified/Experienced Skills!

Specify **ADULT** family member name where applicable.

Name:	Name:	
_____	_____	Accounting
_____	_____	CPA
_____	_____	Audio Visual Technician
_____	_____	Arts:
		_____ Drama _____ Acting
		_____ Theatre _____ Singing
_____	_____	Baby-Sitting, certified
_____	_____	Bookkeeping
_____	_____	Carpentry
_____	_____	Chef:
		_____ Cook _____ Baker
_____	_____	Construction:
		_____ Project Planner
		_____ Worker
_____	_____	Counseling:
		_____ Marriage and Family
		_____ Career/Leadership
		_____ Mental Health
		_____ Substance Abuse
_____	_____	Crafting
_____	_____	Data Entry
_____	_____	Desktop Publishing
_____	_____	Editing
_____	_____	Electrician
_____	_____	Engineering:
		_____ (Specialty)
_____	_____	Event Planner
_____	_____	Financial:
		_____ Planning _____ Investments
_____	_____	Gardening/Landscape
_____	_____	Graphic Design/Artist

Name:	Name:	
_____	_____	Handyman
_____	_____	Housekeeping
_____	_____	Home Care-Giver
_____	_____	Information Technology
_____	_____	Interior Design/Decorating
_____	_____	Language (other than English-fluent for translating)
_____	_____	_____ Sign Language
_____	_____	Law Enforcement/Security
_____	_____	Legal Services
_____	_____	Marketing/Advertising
_____	_____	Medical/Health
_____	_____	Field: _____
_____	_____	Musical Instrument:
_____	_____	_____
_____	_____	Painting (Structural)
_____	_____	Photography
_____	_____	Plumbing
_____	_____	Power-Point design
_____	_____	Printing & Design:
		_____ Signage _____ Banners
		_____ Calligraphy
_____	_____	Public Speaking
_____	_____	Publicity
_____	_____	Sales
_____	_____	Social Media
_____	_____	Social Worker
_____	_____	Sports/Fitness
_____	_____	Teacher/Subject: _____
_____	_____	Videographer/Camera/Lights
_____	_____	Web-Design/Maintenance
_____	_____	Writing
_____	_____	MS OFFICE: Word, Excel, Publisher
_____	_____	Other: _____

Visit our parish website at olmcсандiego.org for more information on our Ministries and Groups!



OUR LADY OF MOUNT CARMEL PARISH REGISTRATION

(Please **PRINT** information and drop this form into the collection basket or at the church office.)

Office use only:
Envelope # _____
Date entered _____

FAMILY LAST NAME: _____ Today's Date: _____

Home Address: _____ City _____ Zip _____

Mailing Address (if different than above) _____ City _____ Zip _____

New to San Diego New to Rancho Peñasquitos

HEAD of Household:

SPOUSE:

Name: _____ **Maiden:** _____

Name: _____ **Maiden:** _____

Email: _____

Email: _____

Cell Phone: _____

Cell Phone: _____

Home Phone: _____

Home Phone: _____

Occupation: _____

Occupation: _____

STATUS (check one) Single Married in Catholic Church / Date _____ Married outside Catholic Church/Date _____

Cohabiting Separated Divorced Widowed

Additional Information	Name	Male/ Female	Date of Birth	Religion	Baptism	Eucharist	Confirmed
Head of household							
Spouse							
Child at home							
Child at home							
Child at home							
Child at home							
Others /Relationship							

(See back side for additional information)