

**St. Boniface Church**  
**531 E. Liberty Street ~ Louisville, KY 40202**  
**502-584-4279**  
[www.stbonifaceparish.com](http://www.stbonifaceparish.com)

**PARISH ENROLLMENT FORM**

ID/FAMILY # \_\_\_\_\_

**HOUSEHOLD INFORMATION**

Date \_\_\_\_\_

Family Name \_\_\_\_\_

Title (circle one)    Mr/Mrs    Mr    Mrs    Ms    Miss    Dr/Mrs    Dr    Other Specify \_\_\_\_\_

Suffix (circle if used) Jr Sr II III IV Other \_\_\_\_\_

Street Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Unlisted (circle)    No    Yes

Cell Phone(\_\_\_\_\_) \_\_\_\_\_

Previous Parish \_\_\_\_\_ City, State \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Work phone \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Work phone \_\_\_\_\_

Children living in household:

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

## STEWARDSHIP OF TIME, TALENT AND TREASURE

I/We will give:

\$ \_\_\_\_\_ per Sunday x 52 = \$ \_\_\_\_\_

\$ \_\_\_\_\_ per month x 12 = \$ \_\_\_\_\_

\$ \_\_\_\_\_ per Quarter x 4 = \$ \_\_\_\_\_

\$ \_\_\_\_\_ per Year x 1 = \$ \_\_\_\_\_

**Signatures:** \_\_\_\_\_

**Date:** \_\_\_\_\_

- Cafeteria Volunteer
- School Volunteer
- Lector
- Eucharistic Minister
- Eucharistic Minister for Sick
- Or homebound
- Altar Server
- Gift Bearer
- Choir
- Usher
- Collection Counter

Suggested new ministries not currently offered: \_\_\_\_\_

Comments: \_\_\_\_\_