



(For office use only)

Parish Offertory Envelope # _____ Family Name: _____

Two Holy Martyrs' Parish

St. Symphorosa and St. Rene Goupil
 6135 South Austin Avenue
 Chicago, IL 60638
 e-mail: info@twoholymartyrs.org
 773-767-1523 (Phone) 773-767-6135 (Fax)
www.twoholymartyrs.org

Today's Date: _____

Family (Last) Name		Mailing Address		City	State	Zip
Home Phone	Primary Cell Phone	Primary E-Mail Address		Former Parish Name & City, State (if known)		

MEMBERS OF THE HOUSEHOLD *(note first person listed is considered Head of Household)*

Name <small>Last, First, Middle Initial (Please PRINT - Include MAIDEN name if applicable)</small>	Sex <small>M/F</small>	Birth Date <small>MM / DD / YYYY</small>	Relationship to Head of Household	Marital Status * <small>(Circle One)</small>	Race / Ethnicity <small>(please check all that apply)</small>	Name of Religion <small>(if not Catholic)</small>	Sacraments Received <small>(please check all that apply)</small>
Adult			Head of Household	M S W D Sep	<input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian / Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Choose not to disclose		<input type="checkbox"/> Baptism <input type="checkbox"/> 1 st Confession <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Matrimony
Adult			<input type="checkbox"/> Spouse <input type="checkbox"/> Other _____	M S W D Sep	<input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian / Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Choose not to disclose		<input type="checkbox"/> Baptism <input type="checkbox"/> 1 st Confession <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Matrimony
Child			<input type="checkbox"/> Child <input type="checkbox"/> Stepchild <input type="checkbox"/> Other _____	N / A	<input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian / Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Choose not to disclose		<input type="checkbox"/> Baptism <input type="checkbox"/> 1 st Confession <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmation
Child			<input type="checkbox"/> Child <input type="checkbox"/> Stepchild <input type="checkbox"/> Other _____	N / A	<input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian / Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Choose not to disclose		<input type="checkbox"/> Baptism <input type="checkbox"/> 1 st Confession <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmation
Child			<input type="checkbox"/> Child <input type="checkbox"/> Stepchild <input type="checkbox"/> Other _____	N / A	<input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian / Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Choose not to disclose		<input type="checkbox"/> Baptism <input type="checkbox"/> 1 st Confession <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmation

* Marital Status - **M**, Married **S**, Single **W**, Widow/Widower **D**, Divorced **Sep**, Separated

Parish Offertory Envelopes will be issued and mailed. What type of envelopes would you like to receive?

- Weekly
 Monthly
 Please inform me of Instructions on Electronic Giving - Send No Envelopes

Does your family have special needs?

- Handicapped Shut In Annulment/Divorce
 Faith Renewal

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(Page Two)

We are a spirit filled community that encourages everyone to take an active part in the Parish. Our Church needs your help. It is our hope that you and your family will consider involvement in one or more of the ministries listed below.

Please check the box next to the Ministry you are interested in and we will give you a call.

Liturgical Ministries

- Eucharistic Minister
- Minister of Care

- Lector

- Adult Choir

- Super Club Funeral Choir
- Minister of Hospitality (Usher)
- Altar Server

Catechetical Programs

- Parish School
- Religious Education/Faith Formation
- R.C.I.A. (Rite of Christian Initiation of Adults)
- SPRED (Religious Education for the Developmentally Disabled)

Organizations

- Moms/Dads and Tots (thru School)
- Athletic Association (thru School or Religious Education/Faith Formation)
- Girl Scouts (Brownies)

- Boy Scouts (Cub Scouts)

- Altar & Rosary Society
- Senior Club (age 55+)

Outreach Programs :

Alcoholics Anonymous (contact the Parish Office)

Narcotics Anonymous (contact the Parish Office)

St. Vincent de Paul Society (773-682-3342)