



**St. Francis of Assisi Parish**  
**STEWARDSHIP COMMITMENT FORM**  
**2017**  
*Total Stewardship – My Gifts of Time, Talent and Treasure.*



**PLEASE PROVIDE YOUR FAMILY INFORMATION BELOW. THIS ENABLES OUR PARISH TO MAINTAIN A CURRENT CENSUS AND ALSO ALLOWS FOR EASE OF CONTACT WITH OUR PARISHIONERS. THANK YOU!**

LAST NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_ MAILING ADDRESS: \_\_\_\_\_  
 (IF DIFFERENT FROM ABOVE.)

PHONE # \_\_\_\_\_

FATHER'S WORK# \_\_\_\_\_ CELL PHONE# \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

MOTHER'S WORK# \_\_\_\_\_ CELL PHONE# \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

REGISTERED IN A PARISH? Y N NAME OF PARISH: \_\_\_\_\_

FAMILY MEMBER NAMES 1. HEAD OF HOUSEHOLD 2. SPOUSE (MAIDEN NAME)	GENDER M/F	BIRTHDATE M/D/YY	MARITAL STATUS (MARRIED, SINGLE, WIDOW/WIDOWER, SEPARATED, OR DIVORCED)	RELIGION (CATHOLIC OR SPECIFY)	BAPTIZED	FIRST COMMUNION	CONFIRMED
1.							
2.							
<b>CHILD(REN)'S NAME(S)</b>							
3.							
4.							
5.							
6.							
7.							

**2017 – 2018 Pre-registration for both Religious Education and Catholic School Families.**

Pre-school – 12<sup>th</sup> Grade Students

Name	School	Grade '17-'18	Parish Religious Education
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**TIME**

Frequent or daily Mass \_\_\_\_\_  
Pray the Rosary daily \_\_\_\_\_  
Celebrate the Sacrament of  
Reconciliation more frequently \_\_\_\_\_  
Pray daily for Parishioners \_\_\_\_\_  
Prayer time with family/parents \_\_\_\_\_  
Read more religious publications \_\_\_\_\_

**TALENT**

Choir _____	Pastoral Council _____
Lector _____	Finance Council _____
Altar Server _____	Annual Parish Supper _____
Lead Rosary before Sunday Mass _____	Christian Mothers _____
Communion to Homebound _____	Catechist or Teacher's Aid _____
Greeter/Gift Bearer/Collection _____	Knights of Columbus _____
Sponsor Couples/Marriage Preparation _____	Snow Removal _____
Play Musical Instrument; <i>Choir</i> _____	Grounds Maintenance _____
Help With Social 1 <sup>st</sup> Sun. of Month _____	Electrical/Plumbing/Carpentry _____
Traveling Chalice Ministry (Praying for Vocations) _____	Other _____

*(Please circle if there is more than one choice i.e. Greeter/Gift Bearer/Collection)*

**TREASURE**

**Each family is asked to prayerfully renew their parish offering commitment.**

My/Our Intentions for offertory giving for 2017 is \$ \_\_\_\_\_

I/we intend to fulfill this:     Weekly     Monthly     Other \_\_\_\_\_

I/we will use the following method:     Envelopes     Mail to Parish Office

I/we do not presently receive offertory envelopes and wish to receive them.



**PLEASE COMPLETE BOTH SIDES AND RETURN BY MARCH 12<sup>TH</sup>, 2017. THANK YOU!**