



# St. Philip Benizi Catholic Church & Our Lady of Peace Mission

1404 Old Highway 52  
Moncks Corner, SC 29461  
Office: 843-761-3777  
Email: Secretary@spbcc.org  
www.spbcc.org

### Adult 1

First & Last Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home # \_\_\_\_\_ Unlisted?   
 Work # \_\_\_\_\_ Cell # \_\_\_\_\_  
 E-Mail \_\_\_\_\_  
 Occupation \_\_\_\_\_

### Adult 2

First & Last Name \_\_\_\_\_  
 Street Address (If Different) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home # \_\_\_\_\_ Unlisted?   
 Work # \_\_\_\_\_ Cell # \_\_\_\_\_  
 E-Mail \_\_\_\_\_  
 Occupation \_\_\_\_\_

Please list all family members including self and check box if sacrament has been received. Add dates if known.

<u>Last Name,</u>	<u>First Name</u>	<u>DOB</u> <small>MM/DD/YY</small>	<u>Baptized</u> <small>(with MM/DD/YY)</small>	<u>1<sup>st</sup> Penance</u> <small>(with MM/DD/YY)</small>	<u>1<sup>st</sup> Communion</u> <small>(with MM/DD/YY)</small>	<u>Confirmed</u> <small>(with MM/DD/YY)</small>	<u>Marriage</u> <small>(If yes please give MM/DD/YY)</small>
1.							
2.							
3.							
4.							
5.							
6.							
7.							

Are you willing to volunteer time for church activities?

Yes     No     Maybe

Please name any talents or skills you can offer:

#### Liturgical involvement or interest:

- Eucharistic Minister
- Lector
- Usher
- Choir/Music
- Sacristan (Set up worship space)

#### Are you interested in being contacted regarding the following?

- Annulment     Adult Confirmation
- RCIA (Becoming Catholic)
- Other (please Specify)