



SAINT JAMES THE APOSTLE

CATHOLIC CHURCH

34700 FREMONT BLVD, FREMONT, CA 94555

REGISTRATION FORM

Last Name: _____ First Name: _____

(If Married)

Occupation: _____ Spouse's Name: _____

Spouse Catholic? Yes _____ No _____ Occupation: _____

Address: _____ City: _____ Zip: _____

Telephone: _____ E-mail: _____

Children: (1) _____ Age: _____

(2) _____ Age: _____

(3) _____ Age: _____

Others: _____

Ethnic Affiliation: _____

Let me extend to you a hearty WELCOME to Saint James the Apostle Catholic Church, Fremont. This is a community of believers where you will become brothers and sisters to each other. Here you will be spiritually nurtured, emotionally nourished and socially enriched. This is a family where you can make wonderful and loyal friends who will become a blessing to you. The parish offers you many opportunities to serve the Lord with your time, talent and treasure. I strongly encourage you to get involved and engaged. By your membership you will certainly help to enrich our parish. I am glad the Lord directed you to this community as you could not have made a better choice. May Jesus and His mother guide you!

Your envelop number for Sunday offering is (____). I strongly encourage that you give to the *Lord what is right and not what is left because God loves a cheerful giver* (2ND Cor. 9:8).

Fr. Antony Vazhappilly (Pastor)

Date: _____