



Our Mother of Good Counsel Catholic Community Stewardship and Registration — 2012-2013

We believe that our parish and you are guided by the Holy Spirit, and it is that Spirit who calls us all to build up the Body of Christ. You can help us to better communicate with you by completing this form on both sides. We also invite you to prayerfully consider this year's financial commitment and areas of service you would enjoy.

Simply drop this into the Sunday collection basket, or you may mail it to:

**OMGC Stewardship/Registration Update
2060 N. Vermont Avenue, Los Angeles, CA 90027**

Information on this form is for parish/school use and electronic email communication only, and will not shared:

Mr. Mr. & Mrs. Mrs. Ms. Church marriage Civil marriage Single/never married
 Engaged Divorced Widowed Separated

Family Last Name: _____ First Name/Head of Household: _____

Address: _____ City: _____ Zip: _____ - _____

Home phone: (____) _____ Cell phone: (____) _____

Work phone: (____) _____ E mail address: _____ @ _____

Religion: _____ Date of Birth: ____/____/____ Ethnicity: _____ Languages: _____

Occupation: _____ Employer/company name: _____

OMGC School Graduate: yes no Class year: _____

Spouse: _____ Religion: _____ Date of Birth: ____/____/____

Cell/work phone: (____) _____ E mail address: _____ @ _____

Religion: _____ Date of Birth: ____/____/____ Ethnicity: _____ Languages: _____

Occupation: _____ Employer/company name: _____

OMGC School Graduate: yes no Class year: _____

Minor children living at home (Ages 18+ will need to file their own registration form):

Name: _____ Relationship _____ Gender: ___M ___F Date of Birth: ____/____/____

Baptized? yes no School: OMGC Other: _____ Current grade level: _____

Name: _____ Relationship _____ Gender: ___M ___F Date of Birth: ____/____/____

Baptized? yes no School: OMGC Other: _____ Current grade level: _____

Name: _____ Relationship _____ Gender: ___M ___F Date of Birth: ____/____/____

Baptized? yes no School: OMGC Other: _____ Current grade level: _____

Name: _____ Relationship _____ Gender: ___M ___F Date of Birth: ____/____/____

Baptized? yes no School: OMGC Other: _____ Current grade level: _____

To complete the registration process you must fill out both pages →



**SHARE YOUR TIME,
TALENT AND TREASURES**

To complete the registration process you must fill out both pages

All are called to give witness to Christ. As stewards in Christ we need to lead good lives and show example through our faith and works. Each of us has different gifts from God. Peter tells us "each one, as a good manager of God's different gifts, must use for the good of others the special gifts he has received from God" (1 Peter 4:11).

I/we recognize the Christian responsibility and duty to support our parish, serving us, the parishioners, and the community at large. I/we accept the responsibility of financial support necessary to provide the sacraments, ministries and programs, and to maintain the parish facilities.

Family Name: _____

I/we attend the following Mass time each week: 5:30pm 7:30am 9:00am 11:00am 12:30pm 6:00pm

In order for the parish to accurately determine its income, please indicate what your annual financial contribution will be:

\$_____ *Please be generous.* **My method of payment is to:** use envelopes, donate by check, use electronic monthly donation through my bank, use my credit card (sign-up on parish website: www.omogc.org)

As a good manager of God's gifts, please allow me to volunteer by sharing my gifts from God in the following areas:

LITURGY

- Altar Server Name _____
- Cantor/Musician Name _____
- Environment/Decoration Name _____
- Eucharistic Minister Name _____
- Greeter Name _____
- Lector Name _____
- Usher Name _____
- Sacristan duties Name _____

EDUCATION/SPITUALITY (18+)

- Eucharistic Adoration Name _____
- Retreat Planning Name _____
- RCIA Planning Name _____
- RCIA Sponsor Name _____
- RCIA Participant Name _____
- Rosary Prayer Group Name _____
- Small Group Facilitator Name _____

OUTREACH

- Bereavement Ministry Name _____
- Elderly/Homebound Care Name _____
- Eucharistic Minister: Hospital/Home Name _____
- Homeless: Sandwich Preparation Name _____
- Homeless: Sandwich Distribution Name _____
- Senior Luncheon Prep/Clean-up Name _____
- Trans./Errands for Homebound Name _____
- Youth Ministry Name _____
- Young Adult Ministry (18-39) Name _____

GENERAL PARISH SUPPORT

- Auction/Fundraising Name _____
- Fundraiser Chair Name _____
- Gardening/Yard Work Name _____
- General Office Help Name _____
- Laundering Altar Towels Name _____
- Mailing/Bulletin Stuffing Name _____
- Publicity/ P.R. Name _____
- Printing Services Name _____
- Small Repairs/Painting Name _____

RELIGIOUS EDUCATION

- Catechist: Liturgy of the Word Name _____
- Catechist: Confirmation Name _____
- CCD Teacher, Sunday: 3-5 yrs old Name _____
- CCD Teacher, Sat: K-8th Name _____
- CCD Teacher, Wed: 1st-6th Name _____
- Group Leader: Confirmation Name _____

PARISH HOSPITALITY

- Baking/Food Prep Name _____
- Chairs/Tables Set-up Name _____
- Clean-up Name _____
- Hostess Name _____
- Make Coffee Name _____
- Provide Refreshments Name _____
- Provide Paper Goods Name _____

Other: _____