

Will your child(ren) be participating in our faith formation programs?

(Religious Education/Confirmation)

Yes ( ) No ( )

Please make comments, ask questions, or provide any additional information that will help us to know and serve you better. Please include any special needs you and your family might have, such as a homebound family member. We invite you to become involved in our Parish Ministries. Please let us know which one interests you.

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## *Holy Trinity Catholic Church*

### **CONFIDENTIAL REGISTRATION FORM**

For pastoral use only

If you have any questions regarding this form or any other special concerns, please telephone:

Holy Trinity  
Parish Office  
366-4400

Email:  
[HolyTrinityNorwood@gmail.com](mailto:HolyTrinityNorwood@gmail.com)

Please complete this form completely and drop in the collection basket or return to the Parish Office.

**Welcome to  
Holy Trinity  
Parish**  
2420 Drex Avenue  
Norwood, Ohio  
45212

