

REGISTRATION FORM:

LAST NAME _____ ADDRESS _____

TITLE/ Mr./Mrs, Mr., Mrs., Ms., Miss, Dr, Dr./Mrs.

PHONE # _____ E-Mail Address _____

MARITAL STATUS: Married _____ Single _____ Widowed _____ Separated _____ Divorced _____

Catholic Marriage _____ Judge or Minister _____ Date _____

Where _____

HIS NAME _____ Date of Birth _____ Religion _____

Sacraments: Baptism _____ Reconciliation _____ Communion _____ Confirmation _____

Church of Sacraments: _____

HER NAME _____ Date of Birth _____ Religion _____

MAIDEN NAME _____

Sacraments:: Baptism _____ Reconciliation _____ Communion _____ Confirmation _____

Church of Sacraments: _____

CHILDREN: (UNDER THE AGE OF 18)

Children over the age of 18 living within the parish, Must complete a separate reg. form.

NAME _____ Date of Birth _____ Religion _____

Baptism _____ Reconciliation _____ Communion _____ Confirmation _____ School _____

Church of Sacraments _____

NAME _____ Date of Birth _____ Religion _____

Baptism _____ Reconciliation _____ Communion _____ Confirmation _____ School _____

Church of Sacraments _____

NAME _____ Date of Birth _____ Religion _____

Baptism _____ Reconciliation _____ Communion _____ Confirmation _____ School _____

Church of Sacraments _____

NAME _____ Date of Birth _____ Religion _____

Baptism _____ Reconciliation _____ Communion _____ Confirmation _____ School _____

Church of Sacraments _____

NAME OF LAST CHURCH YOU WERE REGISTERED AT:

Church Name _____

Address/City & State _____

OFFICE USE ONLY:

Registration Date _____

Parish Envelope # _____