

This form ***must also be completed*** in its entirety when registering as Parishioners.

Family Last Name	Home Phone () -	Primary e-mail:
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Home Address (Street Number, Apt.)	Cell # ()	Alternate e-mail :
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City	State	Zip+4
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Marital Status Married yes no Married in the Catholic Church yes no IF NOT MARRIED (circle one) Single Separated Divorced Widowed

Church Envelopes and mail should be addressed to:	
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Member Information	Father / Adult	Mother / Adult	Child #1	Child #2	Child #3	Child #4
First Name						
Last Name						
Mother's Maiden Name						
Religion						
Occupation						
Employer Name						
Language Spoken at home other than English						
Gender: F) female / M) male						
Date of Birth						
Year of Baptism						
Year of First Communion						
Year of Confirmation						
Date of Marriage						