

Parishioner Registration Form

(Please Print)

Family Last Name: _____

Address: _____ City: _____

Zip: _____ Home phone: (____) _____

Would you like Weekly Offertory Envelopes? yes no

Would you like to receive the monthly newsletter? Email or US Mail?

Previous church attended: _____

Address: _____ City: _____ State: ____ Zip: _____

Do you wish to formally transfer? yes no

Names of those living in household

Title: Mr. / Mrs. / Miss / Ms. / Dr. / other: _____ Last name: _____

First Name: _____ Middle: _____ Goes by: _____

Date of Birth (mm/dd/yy): _____ place of birth: _____

Baptism- Church: _____

City: _____ State: _____ Date: _____

Confirmation- Church: _____

City: _____ State: _____ Date: _____

Work phone: (____) _____ Cell phone: (____) _____

Email address: _____

Marital Status: single / married / divorced / separated / widowed: _____

Wedding anniversary (mm/dd/yy): _____

Title: Mr. / Mrs. / Miss / Ms. / Dr. / other: _____ Last name: _____

First Name: _____ Middle: _____ Goes by: _____

Date of Birth (mm/dd/yy): _____ place of birth: _____

Baptism- Church: _____

City: _____ State: _____ Date: _____

Confirmation- Church: _____

City: _____ State: _____ Date: _____

Work phone: (____) _____ Cell phone: (____) _____

Email address: _____

Information will be used for church purposes only.

Please notify the church office of any changes in your information. Thank you.

Office use only: Date Received: _____ Entered PR: _____ Envelope # _____

Minors

Family name: _____

Last name: _____ First Name: _____ Middle: _____

Goes by: _____ Date of Birth (mm/dd/yy): _____ place of birth: _____

Baptism- Church: _____

City: _____ State: _____ Date: _____

Confirmation- Church: _____

City: _____ State: _____ Date: _____

Last name: _____ First Name: _____ Middle: _____

Goes by: _____ Date of Birth (mm/dd/yy): _____ place of birth: _____

Baptism- Church: _____

City: _____ State: _____ Date: _____

Confirmation- Church: _____

City: _____ State: _____ Date: _____

Last name: _____ First Name: _____ Middle: _____

Goes by: _____ Date of Birth (mm/dd/yy): _____ place of birth: _____

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Goes by: _____ Date of Birth (mm/dd/yy): _____ place of birth: _____

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City: _____ State: _____ Date: _____

Confirmation- Church: _____

City: _____ State: _____ Date: _____