

TODAY'S DATE:

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**ST. JOSEPH PARISH REGISTRATION**

(Please place completed form in Sunday collection basket or return it to the Parish Office.)

PARISH USE ONLY

Database Entry \_\_\_\_\_

Welcome Packet \_\_\_\_\_

HOUSEHOLD LAST NAME:				HOME PHONE:				listed / unlisted
STREET ADDRESS:				CELL PHONE #1:				
MAILING ADDRESS:				CELL PHONE #2:				
CITY:		STATE:	ZIP:		WORK PHONE:			
CONTRIBUTION ENVELOPES? YES / NO			ENVELOPE # ASSIGNED		EMAIL:			
	ADULT 1	ADULT 2	CHILD 1	CHILD 2	CHILD 3	CHILD 4	ADDL MEMBER	
LAST NAME								
FIRST NAME								
GENDER (Male/Female)								
BIRTH DATE								
RELIGION								
OCCUPATION								
EMPLOYER								
SACRAMENTS RECEIVED:								
BAPTISM	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	
CONFESSION	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	
FIRST COMMUNION	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	
CONFIRMATION	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	
MARITAL STATUS								
MARRIAGE DATE								
MARRIED BY A PRIEST	Yes / No	Yes / No						