

PARISH MEMBERSHIP FORM

Please list **all** members of your household, including non-Catholics.  
Make any necessary comments on the back of this form.  
For additional members please use an additional form.

Wedding Date:  
email:  
Date \_\_\_\_\_

FAMILY	FAMILY NAME	DATE of ORIGINAL REGISTRATION	HOME PHONE NO. Put in ( ) if unlisted	For office use only	
	STREET ADDRESS	CITY STATE & ZIP	ADDRESS SECTOR		

MEMBER	FIRST NAME	MAIDEN NAME	LAST NAME	SEX M/F	For office use only	
	BIRTH DATE	PLACE IN FAMILY Head, Spouse, Child, Other	YEARS OF SCHOOL COMPLETED (Adults)	ENVELOPE NUMBER		
	BAPTISMAL STATUS Baptized Catholic, Convert, Baptized Protestant, Not Baptized, Other Religion		FIRST COMM Y OR N	CON- FIRMED Y OR NO	MARITAL STATUS Single, Catholic Marriage, Other Marriage, Widowed, Annulled, Divorced (Not Remarried)	
	PLACE OF EMPLOYMENT OR NAME OF SCHOOL & GRADE	OCCUPATION	WORK PHONE NO.			

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