PARISH MEMBERSHIP FORM

Please list all members of your household, including non-Catholics.

Make any necessary comments on the back of this form.

Wess: 7	Date:
email:	

Date _

or add	itional members please use an	additional form.					
FAM NAM	ILY ME	DATE of ORIGIN REGISTRATIO	IAL N	Put	E PHONE NO. in () f unlisted		For office use only
STRE ADDF	EET		CITY STATE & ZIP		ADDRESS SECTOR		
FIR NAI	ST ME	MAIDEN NAME		LAST NAME		SEX M/F	For office use only
SI BIR DA		PLACE IN FAMILY Head, Spouse, Child, Other			YEARS OF SCHOOL COMPLETED (Adults)	ENVELOPE NUMBER	
3	BAPTISMAL STATUS aptized Catholic, Convert, Baptized Protestant, Not Baptized, Other Religion		FIRST COMM Y OR N	CON- FIRMED Y OR NO	MARITAL STATUS Single, Catholic Marriage, Other M Widowed, Annulled, Divorced (Not Re	larriage, emarried)	
	LACE OF EMPLOYMENT OR ME OF SCHOOL & GRADE		occ	UPATION		WORK PHONE NO.	For office use only
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B)	aptized Catholic, Convert, Baptized Protestant, Not Baptized, Other Religion		YORN	FIRMED Y OR NO	Single, Catholic Marriage, Other N Widowed, Annulled, Divorced (Not F	Remarried) WORK	
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