

SAINT MARY'S REGISTRATION FORM

Please print clearly. Thank you.

Today's Date: _____

Family Last Name _____

Street Address _____ City, State, Zip _____

PO Box (if applicable) _____ Home Phone () _____ **UNLISTED?** Yes No

Primary Home email _____

NAME THAT SHOULD APPEAR ON ENVELOPES: _____

OR I WOULD LIKE TO PARTICIPATE IN ELECTRONIC GIVING. **Y** **N**

Primary Household Members

First & Last Name	Date of Birth MM/DD/YYYY	Gender (M-F)	Cell Phone#	Email Address	Occupation	Employer
Member 1						
Member 2						

*Religion	*Marital Status (Maiden name if applicable)	Baptized Y/N Date & Church	First Eucharist Y/N	Confirmation Y/N Date & Church	Marriage Date & Church City & State
Member 1					
Member 2					

Additional Household Family Members

First & Last Name	Middle Initial	Date of Birth MM/DD/YYYY	Gender (M-F)	*Relationship	*Religion	Baptized Y/N Date & Church	First Eucharist Y/N	Confirmation Y/N Date & Church

*See Reverse

First & Last Name	Middle Initial	Date of Birth MM/DD/YYYY	Gender (M-F)	*Relationship	*Religion	Baptized Y/N Date & Church	First Eucharist Y/N	Confirmation Y/N Date & Church

- Religion:
 RC – Roman Catholic
 B – Baptist
 J – Jewish
 M – Methodist
 P – Protestant
 O - Other
- Marital Status:
 M – Married
 S – Single
 SE – Separated
 D – Divorced
 SP – Single Parent
 W – Widow/Widower
- Relationship:
 S – Son
 D – Daughter
 P - Parent
 G – Grandchild
 Other

My Time, Talent and Treasure interest is:

Special pastoral needs:

Office Use Only: _____
Date: _____

*See Reverse