

St. Alphonsus Catholic Church  
607 South Jackson Street  
Mt. Pleasant, IA 52641

[mtpleasantstal@diodav.org](mailto:mtpleasantstal@diodav.org)

319-385-8410

**Weekly envelopes - Y or N**

**Direct Deposit – Y or N**

Date Registered \_\_\_\_\_

**Husband Name** \_\_\_\_\_ **Wife** \_\_\_\_\_  
First Last First Last Maiden

**Home Address** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Previous town/parish \_\_\_\_\_

Email address #1 \_\_\_\_\_ Email address #2 \_\_\_\_\_

Husband: Date of birth \_\_\_\_\_ Wife: Date of birth \_\_\_\_\_

Religion \_\_\_\_\_ Baptized \_\_\_\_\_ Confirmed \_\_\_\_\_ Religion \_\_\_\_\_ Baptized \_\_\_\_\_ Confirmed \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Place of employment \_\_\_\_\_ Place of employment \_\_\_\_\_

Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Work phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Single \_\_\_\_\_ Married \_\_\_\_\_ Widow/Widower \_\_\_\_\_ Divorced \_\_\_\_\_ Wedding Date \_\_\_\_\_

**Names of Children**                      **Birth Date**                      **Grade in School**                      **Baptized**                      **1<sup>st</sup> Communion**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

Welcome to our St. Alphonsus parish family!