

## *St. Rita Catholic Church - New Parishioner Registration*

\_\_\_\_\_

Last Name of Family \_\_\_\_\_ Home Phone \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State / Zip \_\_\_\_\_

*St. Rita Parish mails a monthly letter to all registered Parishioners. If you choose the "monthly envelope" option, your letter will include a cut off portion on the bottom of the letter and a self-addressed envelope for you to either drop in the collection basket or mail through the post office. If you choose the "weekly envelope" option you will receive a letter without the bottom portion. Instead, you will receive an additional mailing with envelopes for each week.*

Please send (*circle one*):                      monthly envelopes                      weekly envelopes

**Adult:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

(If applicable) Maiden Name \_\_\_\_\_ Wedding Date \_\_\_\_\_

Birthdate \_\_\_\_\_ Sex: F M Religion \_\_\_\_\_

Have you received:    Baptism    Yes    No    Communion    Yes    No    Confirmation    Yes    No

Check which applies:    Married: \_\_\_\_\_    Single: \_\_\_\_\_    Widowed: \_\_\_\_\_    Divorced: \_\_\_\_\_

Place of employment: \_\_\_\_\_ Occupation: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Cell Phone number: \_\_\_\_\_ Ethnicity (optional) \_\_\_\_\_

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**Adult:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

(If applicable) Maiden Name \_\_\_\_\_ Wedding Date \_\_\_\_\_

Birthdate \_\_\_\_\_ Sex: F M Religion \_\_\_\_\_

Have you received:    Baptism    Yes    No    Communion    Yes    No    Confirmation    Yes    No

Check which applies:    Married: \_\_\_\_\_    Single: \_\_\_\_\_    Widowed: \_\_\_\_\_    Divorced: \_\_\_\_\_

Place of employment: \_\_\_\_\_ Occupation: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Cell Phone number: \_\_\_\_\_ Ethnicity (optional) \_\_\_\_\_

**(over)**

**Children:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_  
Birthdate \_\_\_\_\_ Sex: F M Religion \_\_\_\_\_  
Have you received: Baptism Yes No Communion Yes No Confirmation Yes No  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_  
Birthdate \_\_\_\_\_ Sex: F M Religion \_\_\_\_\_  
Have you received: Baptism Yes No Communion Yes No Confirmation Yes No  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_  
Birthdate \_\_\_\_\_ Sex: F M Religion \_\_\_\_\_  
Have you received: Baptism Yes No Communion Yes No Confirmation Yes No  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

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Special needs or information we should be aware of for any member of the family:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previous Parish: \_\_\_\_\_

*Please notify them that you are now members at St. Rita.*

***Please return this registration form to complete your Parish Membership. Thank you.***