

SAINT FRANCIS XAVIER PARISH

303 South Poplar Street, Carbondale, IL 62901 (618) 457-4556

Date of Registration _____

Family Last Name _____ Maiden Name (if applicable) _____

Mailing Name: (i.e. Mr. & Mrs. John Doe) _____

Address: _____

City: _____ State _____ Zip: _____

Email Address _____ Home Phone _____

Cell Phone _____

Adult Household Members

1) First Name _____ Gender _____ DOB _____

Work Phone _____ Occupation/Employer _____

Marital Status: _____ Religion: _____ Baptized: Y _____ N _____

First Communion: Y _____ N _____ Confirmation: Y _____ N _____

2) First Name _____ Gender _____ DOB _____

Work Phone _____ Occupation/Employer _____

Marital Status: _____ Religion _____ Baptized: Y _____ N _____

First Communion: Y _____ N _____ Confirmation: Y _____ N _____

Dependent Children Information

1) First Name _____ Last Name _____

Gender _____ DOB _____ Baptized/Date _____ Eucharist/Date _____

Confirmation/Date _____ School Attending _____ Grade _____

2) First Name _____ Last Name _____

Gender _____ DOB _____ Baptized/Date _____ Eucharist/Date _____

Confirmation/Date _____ School attending _____ Grade _____

3) First Name _____ Last Name _____

Gender _____ DOB _____ Baptized/Date _____ Eucharist/Date _____

Confirmation/Date _____ School attending _____ Grade _____

PLEASE USE REVERSE SIDE IF NEEDED

Dependent Children Information (Continued)

4) First Name _____ Last Name _____
Gender _____ DOB _____ Baptized/Date _____ Eucharist/Date _____
Confirmation/Date _____ School Attending _____ Grade _____

5) First Name _____ Last Name _____
Gender _____ DOB _____ Baptized/Date _____ Eucharist/Date _____
Confirmation/Date _____ School attending _____ Grade _____

6) First Name _____ Last Name _____
Gender _____ DOB _____ Baptized/Date _____ Eucharist/Date _____
Confirmation/Date _____ School attending _____ Grade _____