



SAINT ROMAN PARISH
Parishioner Registration Form
1710 W Bolivar Ave
Milwaukee, WI 53221-2334

Head of Household:

Name _____ M F Birthdate _____

Address _____ City _____ State _____ Zip _____

Telephone: _____ Occupation _____

Email: _____ Religion _____

Language: Spanish English Other: _____

Marital Status: Single Church Marriage Civil Marriage Separated
 Divorced Widowed

Sacraments: Baptism (Date) _____ First Communion (Date) _____
 Confirmation (Date) _____ Holy Matrimony (Date) _____

Spouse:

Name _____ M F Birthdate _____

Check if same address applies as person listed above.

Address _____ City _____ State _____ Zip _____

Telephone: _____ Occupation _____

Email: _____ Religion _____

Language: Spanish English Other: _____

Marital Status: Single Church Marriage Civil Marriage Separated
 Divorced Widowed

Sacraments: Baptism (Date) _____ First Communion (Date) _____
 Confirmation (Date) _____ Holy Matrimony (Date) _____

If you are seeking any sacraments for yourself or a family member, please list below (*Baptism, Confirmation, having your non-Catholic wedding blessed in the Church, etc.*):

Children living at home (under age of 18):

1. Name: _____ M F Birthdate _____

Language: Spanish English Other: _____ Religion: _____

Sacraments: Baptism (Date) _____ First Communion (Date) _____

Confirmation (Date) _____

Special Needs? _____

2. Name: _____ M F Birthdate _____

Language: Spanish English Other: _____ Religion: _____

Sacraments: Baptism (Date) _____ First Communion (Date) _____

Confirmation (Date) _____

Special Needs? _____

3. Name: _____ M F Birthdate _____

Language: Spanish English Other: _____ Religion: _____

Sacraments: Baptism (Date) _____ First Communion (Date) _____

Confirmation (Date) _____

Special Needs? _____

4. Name: _____ M F Birthdate _____

Language: Spanish English Other: _____ Religion: _____

Sacraments: Baptism (Date) _____ First Communion (Date) _____

Confirmation (Date) _____

Special Needs? _____

5. Name: _____ M F Birthdate _____

Language: Spanish English Other: _____ Religion: _____

Sacraments: Baptism (Date) _____ First Communion (Date) _____

Confirmation (Date) _____

Special Needs? _____

For Office Use Only

Envelope Number _____ PDS _____ Bulletin _____ ARCH _____ SENT ENV _____