

# St. Mark's Parish Registration

Family Last Name:	For Office Use Only:	Ministry Directory Received
	Date entered:                      By:	Envelope #:

Street/Mailing Address			
City	Zip Code	Phone	Unlisted?    Y            N
Primary Email		Emergency Contact Number	

**Children Living at Home**

	Male Contact	Female Contact	Child	Child	Child	Child
First Name						
Middle Name						
Last Name						
Religion						
Marital Status						
Gender						
Occupation						
Business Phone						
Cell Phone						
Special Needs						
Date of Birth						
Marriage Date						
*Baptism						
*Communion						
*Confirmation						

\*If unsure of the date mark with **Yes** or **No**

Email Address: Male \_\_\_\_\_ Female \_\_\_\_\_

Moved From:	Parish	City	State
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**St. Mark's Catholic Community**  
**7960 Northview**  
**Boise, ID 83704**  
**375-6651**