

St. John the Baptist Catholic Church Registration Form

(Only the Parishuses the information you provide.)

Date:				
Last name:				
Address:				
y, ZipHome phone:				
E-mail address:				
Do you want to use offertory envelopes?		□yes	□no	
Are your children enrolled at St. John School?		□yes	□no	
Would you like information about St. John School?		□yes	□no	
Are your children registered in Parish religious education classes?		□yes	□no	
Would you like information about religious education classes?		□yes	□no	
<u>Family M</u>	<u>emberInformation</u>			
Male Adult Name				
Religion:	Birth date:			
Female Adult Name				
Religion:	_Birth date:			
Child's Name				
Religion:	_Birth date:			
<u>Child's Name</u>				
Religion:	Birth date:			

Child's Name	
Religion:	
Child's Name	-
Religion:	_Birth date:
Child's Name	
Religion:	_Birth date:

Please call the rectory at (707) 433-5536 if you are interested in volunteering your time and talent to any of our ministries or organizations.