ST. JOHN THE EVANGELIST CHURCH REGISTRATION FORM

Waltz PDS IC

BUDGET #:

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| --- |
| FAMILY NAME: TELEPHONE: |
| STREET ADDRESS: |
| MAILING ADDRESS (if different): EMAIL ADDRESS: |
| HUSBAND’S NAME (first/middle): DATE OF BIRTH: RELIGION: |
|  BAPTISM: Y N FIRST COMMUNION/PENANCE: Y N CONFIRMATION: Y N |
| WIFE’S NAME (first/middle/maiden): DATE OF BIRTH: RELIGION: |
|  BAPTISM: Y N FIRST COMMUNION/PENANCE: Y N CONFIRMATION: Y N |
| MARITAL STATUS: DATE AND PLACE OF MARRIAGE: |
|  |
| CHILDREN AT HOME (first/middle/last if different from family name) |
| NAME: DATE OF BIRTH: BAPTISM & CHURCH OF BAPTISM 1ST COMM 1ST PEN CONF |
|  Y N Y N Y N Y N |
|  Y N Y N Y N Y N |
|  Y N Y N Y N Y N |
|  Y N Y N Y N Y N |
|  Y N Y N Y N Y N |
|  Y N Y N Y N Y N |
| DATE OF REGISTRATION: BUDGET ENVELOPES: Y N |