

Waltz PDS IC

ST. JOHN THE EVANGELIST CHURCH REGISTRATION FORM

BUDGET #:

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	1 ST COMM	1 ST 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