



FOR OFFICE USE ONLY:	
Registration Date:	_____
Envelope #:	_____
Entered in ACS:	_____
Entered in OSV:	_____
Bulletin	_____

Welcome to St. John the Baptist Parish!

(PLEASE PRINT)

TODAY'S DATE: ____/____/____

Please tell us about yourself:

(1) Name: Mr / Mrs / Ms _____
 (First) (Middle) (Last) (Goes By)

Current address _____
 (Street address) (Apt. / PO Box #) (City) (Zip)

Home # (____) _____ Cell # (____) _____

Work # (____) _____ Email address: _____

Male Female **Date of Birth** ____/____/____ Are you Catholic? Yes/No If not Religion? _____

Single Married Divorced Widowed **Date of Marriage** ____/____/____

Married in the Catholic Church? Yes/No Maiden name: _____

Name & location of your employer? _____ Occupation: _____

Were you previously registered at St. John the Baptist Parish as a child or adult? Yes/No If yes when? _____

If no Name & location of your previous parish? _____

If you're currently married and/or living together, please fill out section # 2:

(2) Name: Mr / Mrs / Ms _____
 (First) (Middle) (Last-if different from above) (Goes By)

Male Female **Date of Birth** ____/____/____ Single Married Divorced Widowed

Maiden name: _____ (If applicable) Are you Catholic? Yes/No

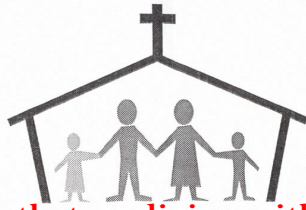
Cell # (____) _____ Work # (____) _____

Email address: _____

Name & location of your employer? _____ Occupation: _____

Were you previously registered at St. John the Baptist Parish as a child or adult? Yes/No If yes when? _____

If no Name & location of your previous parish? _____



Please tell us about the children that are living with you at this time:

1. _____
(First) (Middle) (Last Name If different from parents) (Goes By)

Son Daughter Other (please explain) _____

Date of Birth ____/____/____ **Catholic?** Yes/No

Baptized? Yes/No Date/Location: _____

Penance? Yes/No **Eucharist?** Yes/No **Confirmation?** Yes/No

2. _____
(First) (Middle) (Last Name If different from parents) (Goes By)

Son Daughter Other (please explain) _____

Date of Birth ____/____/____ **Catholic?** Yes/No

Baptized? Yes/No Date/Location: _____

Penance? Yes/No **Eucharist?** Yes/No **Confirmation?** Yes/No

3. _____
(First) (Middle) (Last Name If different from parents) (Goes By)

Son Daughter Other (please explain) _____

Date of Birth ____/____/____ **Catholic?** Yes/No

Baptized? Yes/No Date/Location: _____

Penance? Yes/No **Eucharist?** Yes/No **Confirmation?** Yes/No

4. _____
(First) (Middle) (Last Name If different from parents) (Goes By)

Son Daughter Other (please explain) _____

Date of Birth ____/____/____ **Catholic?** Yes/No

Baptized? Yes/No Date/Location: _____

Penance? Yes/No **Eucharist?** Yes/No **Confirmation?** Yes/No

5. _____
(First) (Middle) (Last Name If different from parents) (Goes By)

Son Daughter Other (please explain) _____

Date of Birth ____/____/____ **Catholic?** Yes/No

Baptized? Yes/No Date/Location: _____

Penance? Yes/No **Eucharist?** Yes/No **Confirmation?** Yes/No