

St Patrick Parish

Reg Date: _____

Env# _____

Family Registration

319 West Main, Sparta, WI 54656 (608) 269-2655

Do you wish to be a registered or school only or REP only member at: St. Patrick's or St John's

((circle) Can only register with one parish.)

Last Name: _____ First Name(s): _____

Mailing Name (ie Mr. & Mrs. John Doe): _____

Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Emerg. Phone: _____ Family Email: _____

Are you currently registered at another parish? _____ Where?: _____

Where are your sacramental records located? (parish, city, state) _____

Where you registered under a parent? _____ If yes or unsure, Parent(s) Name: _____

Do you have a family member with special needs? What? _____

Individual Member Information

Role: (Head of House, Husband, Wife etc.) _____

Role: (Head of House, Husband, Wife etc.) _____

First Name / _____

First Name / _____

Nickname: _____

Nickname: _____

Gender: Male / Female (Maiden name) _____

Gender: Male / Female (Maiden) _____

DOB _____
(mm/dd/yyyy)

DOB _____
(mm/dd/yyyy)

Work Phone/Cell _____

Work Phone/Cell _____

Phone: _____

Phone: _____

First Language: _____

First Language: _____

Occupation: _____

Occupation: _____

Employer: _____

Employer: _____

Sacramental Info:

Religion? _____ Baptized? _____

Sacramental Info:

Religion? _____ Baptized? _____

Reconcil? _____ First Eucharist? _____ Confirmed? _____

Reconcil? _____ First Eucharist? _____ Confirmed? _____

Single, Married, Separated, Divorced, Annulled (circle)

Single, Married, Separated, Divorced, Annulled (circle)

Marriage Date: _____ Valid Catholic Marriage? _____

Do you currently subscribe to the Catholic Times? _____

Where was marriage: _____

Parish/City/State

Do you consent to your name/picture put on our web page/bulletin or announced at mass as new members?

Signature

Office Use: Parishsoft _____ Diocese: _____

Member ltr: _____

Updated: 18 Nov 15

(Over)

Dependent Children/Family Member

Relationship to
Head of Household
(*Son, Daughter,
Mother Father*)

	First Name	/	Last Name	Sex M/F	Birthdate	Religion	Baptism	First Euch.	Confirm.
1.	_____ / _____			_____	____ / ____ / ____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check if Sacrament Received. Add Date if known.									

Relationship to
Head of Household
(*Son, Daughter,
Mother Father*)

	First Name	/	Last Name	Sex M/F	Birthdate	Religion	Baptism	First Euch.	Confirm.
1.	_____ / _____			_____	____ / ____ / ____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check if Sacrament Received. Add Date if known.									

Relationship to
Head of Household
(*Son, Daughter,
Mother Father*)

	First Name	/	Last Name	Sex M/F	Birthdate	Religion	Baptism	First Euch.	Confirm.
1.	_____ / _____			_____	____ / ____ / ____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check if Sacrament Received. Add Date if known.									

Relationship to
Head of Household
(*Son, Daughter,
Mother Father*)

	First Name	/	Last Name	Sex M/F	Birthdate	Religion	Baptism	First Euch.	Confirm.
1.	_____ / _____			_____	____ / ____ / ____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check if Sacrament Received. Add Date if known.									

Relationship to
Head of Household
(*Son, Daughter,
Mother Father*)

	First Name	/	Last Name	Sex M/F	Birthdate	Religion	Baptism	First Euch.	Confirm.
1.	_____ / _____			_____	____ / ____ / ____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check if Sacrament Received. Add Date if known.									

Relationship to
Head of Household
(*Son, Daughter,
Mother Father*)

	First Name	/	Last Name	Sex M/F	Birthdate	Religion	Baptism	First Euch.	Confirm.
1.	_____ / _____			_____	____ / ____ / ____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check if Sacrament Received. Add Date if known.									

Please fill in all blank boxes and provide changes where necessary. If need to add additional members please use a second form.

Remarks: