

Registration Date _____/_____/_____

Sacred Heart Parish & St. John the Baptist Parish

Parish Office ~ 62 School St.

Manchester-by-the-Sea, MA 01944

Family Information

Last Name _____

Cell Number _____

Family Email _____

Mailing Name _____

Home Phone () - _____

Emergency Phone () - _____

Address Information

Address 1 _____

Address 2 _____

City _____ State _____ Zip/Postal _____

Publish Phone Publish Address Publish Email Receive Visits Receive Contributions Envelopes

Member Information

First Name _____

Nick Name _____

Role _____

Gender M / F

Date of Birth _____

Maiden Name _____

Email _____

Birth Place _____

Ethnicity _____

Work Phone () - _____

First Language _____

Cell Phone () - _____

Special Needs _____

Sacrament Information

Catholic _____/_____/_____

Baptism _____/_____/_____

Location _____

Reconciliation Prep _____/_____/_____

First Eucharist _____/_____/_____

Location _____

Location _____

Confirmation _____/_____/_____

Marriage _____/_____/_____

Location _____

Location _____

Member Information

First Name _____
Role _____
Date of Birth _____
Email _____
Ethnicity _____
First Language _____
Special Needs _____

Nick Name _____
Gender M / F
MaidenName _____
Birth Place _____
Work Phone () - _____
Cell Phone () - _____

Sacrament Information

Catholic _____
 Reconciliation Prep _____
Location _____
 Confirmation _____
Location _____

Baptism _____
Location _____
 First Eucharist _____
Location _____
 Marriage _____
Location _____

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