

ST. DENIS PARISH REGISTRATION FORM

DATE _____

LAST NAME: _____

ADDRESS (include Apt. #): _____

CITY: _____ ZIP: _____ HOME PHONE: _____ Listed __
Unlisted __

WORK PHONE _____ CELL PHONE _____ E-MAIL _____

MARITAL STATUS (Check 1): Catholic Marriage _____ Civil Marriage _____ Single _____
Widowed _____ Separated _____ Divorced _____

MALE

FEMALE

FIRST NAME _____

MAIDEN NAME _____

BIRTHDATE (Mo/Day/Year) _____

RELIGION _____

OCCUPATION _____

SACRAMENTS RECEIVED (Please Circle)

Baptism	YES/NO	YES/NO
1 st Communion	YES/NO	YES/NO
Confirmation	YES/NO	YES/NO

CHURCH ATTENDANCE: Regular _____ Frequent _____ Occasional _____ Seldom _____

SUNDAY ENVELOPES: Will Use Envelopes _____ Will Not Use Envelopes _____

NAME OF PREVIOUS PARISH: _____ CITY/STATE _____

COMPLETE THE FOLLOWING FOR CHILDREN LIVING AT HOME:

<u>Name</u>	<u>Birthdate</u>	<u>Baptism</u> Yes/No	<u>1st Com</u> Yes/No	<u>Confirmed</u> Yes/No	<u>School</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

(Please list additional children on reverse side)

WHICH CHURCH DO YOU ATTEND?

___ St. Denis Church
___ Our Lady of the Wayside

WHEN COMPLETED, PLEASE DROP IN COLLECTION BASKET, AT PARISH OFFICE, OR MAIL.