

PLEASE PRINT ALL INFORMATION

Last Name:				Home Phone				Date Registered				
Street Address:				City				Zip Code				
FAMILY MEMBERS: First name, Middle initial (put different last name in parentheses)	Birth			Baptism	1st Communion	Confirmation	Employer/Job Title or School	Cell / Work Phone	Email address			
	Month	Day	Year									
Mr Mrs Miss Ms												
Mr Mrs Miss Ms												
Marital Status												
Single	Separated	Date of Marriage				Church / Place of Marriage						
Divorced	Widowed	Maiden Name				City / State						
Annulment	Marriage											
Catholic Marriage												
Welcome Packet Received	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Preferred Language: English Spanish French							Family Number

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