St. John's Parish Registration Form

Date: _____

Please Print:

FAMILY NAME _____ **PRIMARY PHONE** _____ **UNLISTED? Y N**

STREET _____ **APARTMENT #** _____ **PRIMARY EMAIL** _____

CITY _____ **STATE** _____ **ZIP** _____

If transferring from a local (Birmingham Diocese) Catholic church, please name that church: _____ _____

Church Name **City**

ADULT MALE: **(Please Circle)** **Single** **Married** **Widowed** **Divorced** **Date of Marriage:**_____

_____ _____ _____ _____ _____

First Name **Middle** **Last** **Birth Date** **Religious Denomination**

_____ _____ _____ _____

Occupation **Place of Employment** **Work Phone** **Cell Phone**

Sacraments Received: (Please Circle) ***Baptism*** ***Holy Communion*** ***Confirmation***

ADULT FEMALE: **(Please Circle)** **Single** **Married** **Widowed** **Divorced** **Maiden Name:**_____

_____ _____ _____ _____ _____

First Name **Middle** **Last** **Birth Date** **Religious Denomination**

_____ _____ _____ _____

Occupation **Place of Employment** **Work Phone** **Cell Phone**

Sacraments Received: (Please Circle) ***Baptism*** ***Holy Communion*** ***Confirmation***

Unmarried Children Living at Home (Include College Students)

			SACRAMENTS (Check those received)					
First Name	M / F	Birth Date	Baptism	First Reconciliation	First Eucharist	Confirmation	School Attending	Grade