

St. John the Baptist Parish Registration Form

Family Name: _____

Date: _____

General Information

Mailing Address: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Include in Parish Directory? Y / N

Include in Parish Mailing List? Y / N

Head of Household

First Name: _____ Middle Name: _____

Maiden Name (if applicable): _____ Gender: _____

Date of Birth: _____ Religion: _____

Marital Status: Married ____ Single ____ Widowed/Widower ____ Separated ____ Divorced ____

Sacraments Received: Baptism ____ First Communion ____ Confirmation ____

Occupation: _____

Spouse

First Name: _____ Middle Name: _____

Maiden Name (if applicable): _____ Gender: _____

Date of Birth: _____ Religion: _____

Sacraments Received: Baptism ____ First Communion ____ Confirmation ____

Occupation: _____

Children (Under 22 and living in the household. Please include last name if different from family name.)

First Name: _____ Middle Name: _____

Date of Birth: _____ Gender: _____

Sacraments Received: Baptism ____ First Communion ____ Confirmation ____

First Name: _____ Middle Name: _____

Date of Birth: _____ Gender: _____

Sacraments Received: Baptism ____ First Communion ____ Confirmation ____

First Name: _____ Middle Name: _____

Date of Birth: _____ Gender: _____

Sacraments Received: Baptism ____ First Communion ____ Confirmation ____

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First Name: _____ Middle Name: _____

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Sacraments Received: Baptism ____ First Communion ____ Confirmation ____

First Name: _____ Middle Name: _____

Date of Birth: _____ Gender: _____

Sacraments Received: Baptism ____ First Communion ____ Confirmation ____

Additional Information
