

Today's Date: _____

Office ID #: _____ Envelope #: _____

Please check which applies: New Parishioner Current Parishioner Updating Information

St. Anthony de Padua Catholic Church

Parish Registration Form – Please Print

All correspondence will be addressed to the following name(s):

Mr./Mrs. Mr. Mrs. Ms. Miss _____

[Last Name]

[Head of Household First Name(s)]

Street Address: _____ P.O. Box/Apt. #: _____

City/State: _____ Zip Code: _____ Subdivision: _____

Phone: _____ (home) E-Mail: _____

CHURCH ATTENDANCE: Regular Occasional Never

MARITAL STATUS: Catholic Church Marriage Non-Catholic Church Marriage Justice of the Peace

(Please check one) Married Single Divorced Separated Widowed

MEMBER INFORMATION

	Head	Spouse	Child	Child	Child	Child	Other
First Name							
Last Name (If Different) or Maiden Name							
Sex							
Marital Status							
Religion							
Special Needs							
Language(s) Spoken							
Occupation							
Business Phone							
Student Grade (Children)							
Birth Date							

SACRAMENTS RECEIVED:

Baptism Catholic	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)
Non-Catholic	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)
Date (if known)							
First Communion	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)
Date (if known)							
Reconciliation/ Confession	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)
Date (if known)							
Confirmation	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)
Date (if known)							
Marriage	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)	<input type="checkbox"/> (Y) <input type="checkbox"/> (N)
Date							

What type of parish activity or ministry do you have an interest in? _____

Ministries I am interested in volunteering for: _____

Please send me weekly contribution envelopes - YES NO Secretary>forms>census form>03/15/06