

## NEW PARISHIONER REGISTRATION FORM All information will be kept confidential.

				Apt
Address:Street Addre	ess	City	Zip	* _
hone Number		Ema	il	
usband: First Name		Birthda	te:/	
thnicity:		Religion:		
acraments: Baptism	Reconciliation	Eucharist	Confirmation	Marriage
V <b>ife:</b> First Name & Maid	en Name		Birthdate	e:/
thnicity:		Religion:		
acraments: Baptism				
Status: Married:	Church or Civil	l Separated	Single Dive	orced Widow
married, please list da	40 and mlage of man	·••		
	C	CHILDREN (In Ho	ousehold):	
Name:Sacraments: Ban		`	,	ation
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If there is any additional information, please list them on the back of this sheet.