

ST. PETER CHURCH REGISTRATION FORM

Please note that all information submitted is treated as confidential.

Family Last Name: _____ Wife's Maiden Name: _____

Street Address: _____

Town/City: _____ Zip Code: _____

Mailing Address (if different than Street Address): _____

Telephone Number (indicate if unlisted): _____ Cellphone: _____

Email Address: _____

ADULTS IN HOUSEHOLD

| First Name | Date of Birth | Occupation | Religion | Check Sacraments Received | | | |
|------------|---------------|------------|----------|---------------------------|-----------|---------|--------------|
| | | | | Baptism | Eucharist | Penance | Confirmation |
| 1. | | | | | | | |
| 2. | | | | | | | |

Marital Status (Circle One):

Single Engaged Married Separated Divorced Widowed

If married, date of marriage: _____ Were you married by a Catholic priest? _____

CHILDREN IN HOUSEHOLD

(list those living at home under 21, in college, or in the military)

| First and Last Name | Birthdate | M/F | School | Grade in 2017-18 | Sacraments Received | | | |
|---------------------|-----------|-----|--------|------------------|---------------------|-------|------|-------|
| | | | | | Bap. | Euch. | Pen. | Conf. |
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |
| 4. | | | | | | | | |

Do we have permission to publish your name in the bulletin to officially welcome you to the parish? _____