



# St Monica Catholic Church

## Parishioner Registration Form

Family Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Head of Household: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone #: \_\_\_\_\_

Marital Status: Single: \_\_\_ Married: \_\_\_ Divorced: \_\_\_ Widowed: \_\_\_

### **Sacramental Information:**

Baptism: \_\_\_\_\_ (If Yes) Church of Baptism: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_

First Communion: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

Confirmation: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

Marriage: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

Spouse: \_\_\_\_\_ Maiden Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone #: \_\_\_\_\_

Marital Status: Single: \_\_\_ Married: \_\_\_ Divorced: \_\_\_ Widowed: \_\_\_

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Confirmation: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

Marriage: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

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Confirmation: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

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Confirmation: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

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Confirmation: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

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Baptism: \_\_\_\_\_ (If Yes) Church of Baptism: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_

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Confirmation: \_\_\_\_\_ (If Yes) Church : \_\_\_\_\_ Date : \_\_\_\_\_

Office Use Only: Received BY: _____ Date: _____ Entered Parishsoft: _____
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