

Date: \_\_\_\_\_

# St. Joseph Catholic Church Parish Registration Form

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

How should mail to your home be addressed? Please circle one.

Mr. & Mrs. Mrs. & Mr. Dr. & Mrs. Dr. & Mr. Mr. Mrs. Ms. Miss  
Use both names on family mail  Other \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ unlisted?

Home Phone: \_\_\_\_\_ unlisted?

email 1: \_\_\_\_\_ unlisted?

email 2: \_\_\_\_\_ unlisted?

Marital Status: \_\_\_\_\_

If married, please complete the following:

Marriage Date \_\_\_\_\_

Is your marriage recognized by the Catholic Church? Yes  No

Church/Place: \_\_\_\_\_

Priest: \_\_\_\_\_

# WELCOME



I understand that by becoming a member of the St. Joseph Catholic Church community I am called to:

1. Attend Mass regularly at this parish.
2. Use my Sunday collection envelopes.
3. Support the Ministries of my Parish.
4. I have attached a photo of myself/family.

\_\_\_\_\_  
(Signature)

<b>OFFICE USE ONLY</b>	
Envelope Number _____	
Date Entered _____	
Entered by _____	
Photo submitted:    Yes <input type="checkbox"/> No <input type="checkbox"/>	

Individual Information	Head of Household	Spouse
First Name		
Middle Name		
Last Name		
Preferred Name		
Maiden Name		
Date of Birth		
Gender	Male/Female	Male/Female
Religion		
Primary Language		
Second Language		
Occupation		
Employer		
Work Phone/Extension		
Sacraments		
Baptized	Yes/No	Yes/No
Date		
Priest		
Church		
City/State		
Eucharist	Yes/No	Yes/No
Date		
Priest		
Church		
City/State		
Confirmed	Yes/No	Yes/No
Date		
Bishop		
Church		
City/State		

**Children (under the age of 18 and living at home) \*Please see bottom of form.**

<b>Individual Information</b>	<b>First</b> Son/Daughter/Other	<b>Second</b> Son/Daughter/Other	<b>Third</b> Son/Daughter/Other	<b>Fourth</b> Son/Daughter/Other	<b>Fifth</b> Son/Daughter/Other
First Name					
Middle Name					
Last Name					
Preferred Name					
Date of Birth					
Gender	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female
Religion					
Religious Ed Grade					
School Grade					
School Attending					
Primary Language					
Second Language					
<b>Sacraments</b>					
Baptized	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Date					
Priest					
Church					
City/State					
Eucharist	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Date					
Priest					
Church					
City/State					
Confirmed	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Date					
Bishop					
Church					
City/State					

**\*Please note: If you have children 18 and older and they wish to be members at St. Joseph, please have them complete a separate registration form for themselves.**