

# St Joseph Parish Family Registration

200 W Carlton Ave., Washington, NJ 07882 908 689-0058

Reg Date:

Contrib. Env.?  Env#

Mailing Name:

Home Phone:

Last Name:

Family Email:

First Name(s)

Address:

*Permission to publish phone, address, email in Parish Directory*

Add2:  CARRT

Publish Phone?

Publish Address?

Publish Email?

City:  State:

Zip:  -  AreaCode:

School District:

## Couple/Head of Household Information

Marital Status:  Married by Priest/Deacon?  Anniversary Date:  Wedding Church/City:

**Husband/Head:**

**Wife:**

Parish Status:

Name:

DOB:

Sacramental Info: Baptized?  Catholic?   
RCIA?

Baptized?  Catholic?   
RCIA?

Reconcil?  First Eucharist?  Confirmed?

Reconcil?  First Eucharist?  Confirmed?

Occupation:

Work Phone:

Email:

## Children Information

Child	Birthdate	Sex	Grad Yr
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Special Needs:

Check if Sacrament Received. Add Date if known.	Baptism	Catholic?	Eucharist	Reconciliation	Confirmation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------

Check if Sacrament Received. Add Date if known.	Baptism	Catholic?	Eucharist	Reconciliation	Confirmation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------

Check if Sacrament Received. Add Date if known.	Baptism	Catholic?	Eucharist	Reconciliation	Confirmation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please enter the correct information where provided.

# St Joseph Parish Family Registration

200 W Carlton Ave., Washington, NJ 07882 908 689-0058

Reg Date:

Contrib. Env.?  Env#

Mailing Name:

Home Phone:

Last Name:

Family Email:

First Name(s):

Address:

*Permission to publish phone, address, email in Parish Directory*

Add2:  CARRT

Publish Phone?

Publish Address?

Publish Email?

City:  State:

Zip:  -  AreaCode:

School District:

## Children Information

Child	Birthdate	Sex	Grad Yr	Special Needs:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Check if Sacrament Received. Add Date if known.	Baptism <input type="checkbox"/>	Catholic? <input type="checkbox"/>	Eucharist <input type="checkbox"/>	Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Check if Sacrament Received. Add Date if known.	Baptism <input type="checkbox"/>	Catholic? <input type="checkbox"/>	Eucharist <input type="checkbox"/>	Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Check if Sacrament Received. Add Date if known.	Baptism <input type="checkbox"/>	Catholic? <input type="checkbox"/>	Eucharist <input type="checkbox"/>	Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>

## Children Information

Child	Birthdate	Sex	Grad Yr	Special Needs:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Check if Sacrament Received. Add Date if known.	Baptism <input type="checkbox"/>	Catholic? <input type="checkbox"/>	Eucharist <input type="checkbox"/>	Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Check if Sacrament Received. Add Date if known.	Baptism <input type="checkbox"/>	Catholic? <input type="checkbox"/>	Eucharist <input type="checkbox"/>	Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Check if Sacrament Received. Add Date if known.	Baptism <input type="checkbox"/>	Catholic? <input type="checkbox"/>	Eucharist <input type="checkbox"/>	Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>

Please enter the correct information where provided.

## **STEWARDSHIP OF TIME & TALENT FOR MINISTRY**

**The following ministries and organizations are offered at Saint Joseph Parish.  
Please indicate which ministry you currently are involved with.  
If you may have an interest in a ministry or would like information please indicate.  
A representative from the ministry will contact you.**

- |  |  |
|--|--|
| <input type="checkbox"/> Adult Choir                           | <input type="checkbox"/> Hospitality Ministry      |
| <input type="checkbox"/> Altar Rosary Society                  | <input type="checkbox"/> Instrumentalist for Mass  |
| <input type="checkbox"/> Altar Servers                         | <input type="checkbox"/> Knights of Columbus       |
| <input type="checkbox"/> Arts & Environment                    | <input type="checkbox"/> Columbiettes              |
| <input type="checkbox"/> Bereavement Support                   | <input type="checkbox"/> Lectors                   |
| <input type="checkbox"/> Bible Study Group (Adults)            | <input type="checkbox"/> Outreach Ministry         |
| <input type="checkbox"/> Bingo Workers                         | <input type="checkbox"/> Parish Historical Society |
| <input type="checkbox"/> Children's Choir                      | <input type="checkbox"/> Parish Nurses             |
| <input type="checkbox"/> Clerical Assistance for Parish Office | <input type="checkbox"/> Pre Cana                  |
| <input type="checkbox"/> Couples Club                          | <input type="checkbox"/> Pro-Life Committee        |
| <input type="checkbox"/> Correctional Facility Ministry        | <input type="checkbox"/> R.C.I.A.                  |
| <input type="checkbox"/> Eucharistic Ministers                 | <input type="checkbox"/> Religious Education       |
| <input type="checkbox"/> Eucharistic Visitation                | <input type="checkbox"/> Separated/Divorced        |
| <input type="checkbox"/> Evangelization                        | <input type="checkbox"/> Social Club               |
| <input type="checkbox"/> Grounds Committee                     | <input type="checkbox"/> Ushers                    |
| <input type="checkbox"/> Hispanic Ministry                     | <input type="checkbox"/> Youth Ministry            |