

St. John the Baptist Parish Registration Form

Please fill in all that applies. All information is treated as confidential.

Family Name: _____ Wife's Maiden Name: _____

Address: _____

Mailing Address if different: _____

Telephone: _____ Email: _____

Adults in Household*

Sacraments Received

First Name	Birthdate	Occupation	Religion	Bap.	Euch.	Confir

Marital Status (circle one): Single Married Separated Divorced Widowed

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

Children in Household*

Sacraments Received

First and Last name	Birthdate	M/F	School	Current Grade	Bap	Euch.	Confir -mation

Are there any Special Needs of which you'd like us to be aware? _____

Please circle the donation method that you prefer: _____

Offertory-Envelopes Loose Online-Giving Auto-Bill-Pay

Please use back of form for any comments and/or further listing of household members.* **Welcome to SJB!