Catholic Church

180 S. Fremont Street Lewiston, MN 55952 Phone: (507) 523-2428

Household Last Name			
Today's Date	/	/	

Adult Two Last Name	First	
	Primary Phone	
Mailing address if different		
City	State Zip Code	
Marital Status □ Married □ Widowed □ Single □ Separated	□ Divorced	
Wedding Date/ Place of Marriage _		
Married by a Catholic PriestYesNo Married		
Married by a Catholic PriestYesNo Married If transferring from another Parish please provide nar	·	
If transferring from another Parish please provide nar	me of parish and city.	
If transferring from another Parish please provide nar	me of parish and city.	
If transferring from another Parish please provide nar	me of parish and city.	
If transferring from another Parish please provide nar	me of parish and city. City, State	
If transferring from another Parish please provide nar Parish Faith Information – check in	city, State City, State if relevant; fill in dates if known	
If transferring from another Parish please provide nar Parish Faith Information – check is Head	city, State City, State if relevant; fill in dates if known Adult Two Religion	
Faith Information — check if Head Religion —	city, State City, State if relevant; fill in dates if known Adult Two Religion	
Faith Information – check i Head Religion//	city, State	
Faith Information – check is Head Religion/	city, State	
Faith Information – check is Head Religion	city, State	
Faith Information – check i Head Religion	city, State	

Dependent Children Living at Home

Child's Name	Child's Name
Date of Birth Gender	Date of Birth Gender
BaptismNoYes Date:	BaptismNoYes Date:
Place:	Place:
1st Communion NoYes	1st Communion NoYes
Confirmation NoYes	Confirmation NoYes
Current grade in school	Current grade in school
Name of school	Name of school
Would you like offering envelopes for this child? Yes No	Would you like offering envelopes for this child? Yes No
Child's Name	Child's Name
Date of Birth Gender	Date of Birth Gender
BaptismNoYes Date:	BaptismNoYes Date:
Place:	Place:
1st Communion NoYes	1st Communion NoYes
Confirmation NoYes	Confirmation NoYes
Current grade in school	Current grade in school
Name of school	Name of school
Would you like offering envelopes for this child?	Would you like offering envelopes for this child?
Yes No	Yes No
Child's Name	Other Significant information we should know
Date of Birth Gender	
BaptismNoYes Date:	
Place:	
1st Communion NoYes	
Confirmation NoYes	
Current grade in school	
Name of school	
Would you like offering envelopes for this child?	
Yes No	