

# ST. EDITH PARISH REGISTRATION FORM

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

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

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Permission to publish telephone, address and e-mail in Parish Directory:

Phone:  Yes  No

Address:  Yes  No

E-mail:  Yes  No

Permission to publish picture(s) on parish website and/or bulletin:  Yes  No

## HUSBAND (or Single Male)

Name: \_\_\_\_\_  
(First) (Middle) (Last, if different)

Date of Birth: \_\_\_\_\_ (mm/dd/yyyy)

Catholic:  Yes  No If no, what religion? \_\_\_\_\_

Baptized:  Yes  No First Communion:  Yes  No Confirmed:  Yes  No

RCIA:  Yes  No If yes, what church? \_\_\_\_\_

Marital Status:  Single  Married  Widowed  Divorced

Marriage Date: \_\_\_\_\_ Priest or Deacon: \_\_\_\_\_

Church: \_\_\_\_\_ Other: \_\_\_\_\_

City, State: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## WIFE (or Single Female)

Name: \_\_\_\_\_  
(First) (Middle) (Last, if different)

Date of Birth: \_\_\_\_\_ (mm/dd/yyyy)

Catholic:  Yes  No If no, what religion? \_\_\_\_\_

Baptized:  Yes  No First Communion:  Yes  No Confirmed:  Yes  No

RCIA:  Yes  No If yes, what church? \_\_\_\_\_

Marital Status:  Single  Married  Widowed  Divorced

Marriage Date: \_\_\_\_\_ Priest or Deacon: \_\_\_\_\_

Church: \_\_\_\_\_ Other: \_\_\_\_\_

City, State: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

PLEASE SEE PAGE 2 FOR ADDITIONAL INFORMATION

## ST. EDITH PARISH REGISTRATION FORM – Page 2

PLEASE LIST ALL DEPENDENT CHILDREN

Full Name	Child 1	Child 2	Child 3	Child 4
First:				
Middle:				
Last:				
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth:				
<b>Baptism:</b>				
Church:				
City, State:				
Date (if known):				
<b>First Communion:</b>				
Church:				
City, State:				
Date (if known):				
<b>Confirmation:</b>				
Church:				
City, State:				
Date (if known):				

### FOR OFFICE USE ONLY

Envelope Number  
 Roster  
 Database  
 File Card  
 Newcomer's Packet
