



# St John the Baptist

*Growing in Faith Through Stewardship*

OFFICE USE ONLY

ID# \_\_\_\_\_

## PARISH REGISTRATION FORM (Please print)

Date: \_\_\_\_\_  
 How long with parish: \_\_\_\_\_  
 Circle Mass most frequently attended:  
     5:30 Sat      9:00 AM  
     11:30 AM     Life Teen

Information which is special to yourself or a family member, please list name and details about need in comment section below

[ ] Large print worship aid      [ ] Special needs relating to education class  
 [ ] Wheelchair seating          [ ] Gluten intolerant  
 [ ] Homebound services          [ ] Other \_\_\_\_\_

RELATIONSHIP	HEAD/ SPOUSE/ ADULT (please circle one)			HEAD/ SPOUSE/ ADULT (please circle one)		
	<i>Last</i>	<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>First</i>	<i>Middle</i>
NAME						
NICKNAME						
BIRTHDATE/GENDER	(mo/day/year)		Gender: M F	(mo/day/year)		Gender: M F
ETHNICITY						
RELIGION						
OCCUPATION						
EMPLOYER						
WORK PHONE						
CELL PHONE						
EMAIL						

HOME PHONE \_\_\_\_\_ FAMILY STATUS: [ ] Single [ ] Married [ ] Divorced [ ] Widowed

MAILING ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
(if different than mailing address: \_\_\_\_\_)

CHILDREN (living at home): FULL NAME (First, Middle, Last)	NICKNAME	GENDER	BIRTHDATE	GRADE	RELIGION	ETHNICITY

**COMMENTS:**  
\_\_\_\_\_  
\_\_\_\_\_