

Parish Registration (please check one)

_____ St. John the Evangelist _____ St. Agnes

Family Name _____

Local Address _____

City _____ State _____ Zip _____ Phone _____

Local Subdivision _____

Northern Address _____

City _____ State _____ Zip _____ Phone (____) _____

Marital Status _____ Date of Marriage _____

Mr.:
First Name _____
DOB _____
Religion _____
Education Level _____
Occupation _____

Mrs., Ms., Miss:
First Name _____
DOB _____
Religion _____
Education Level _____
Occupation _____

Children:
First Name _____
DOB _____
Religion _____
Baptized _____
1st Communion _____
Confirmation _____
Current Grade _____
Current School _____
Enrolled in CCD? _____

Children:
First Name _____
DOB _____
Religion _____
Baptized _____
1st Communion _____
Confirmation _____
Current Grade _____
Current School _____
Enrolled in CCD? _____

Children:
First Name _____
DOB _____
Religion _____
Baptized _____
1st Communion _____
Confirmation _____
Current Grade _____
Current School _____
Enrolled in CCD? _____

Children:
First Name _____
DOB _____
Religion _____
Baptized _____
1st Communion _____
Confirmation _____
Current Grade _____
Current School _____
Enrolled in CCD? _____