



# CHURCH OF ALL SAINTS PARISHIONER REGISTRATION



*Complete with new or updated information and return to Parish Office.*

## **HEAD of HOUSEHOLD** Please Print

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Last First Middle Day Month Year

Home Address: \_\_\_\_\_  
City State Zip Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Area Code Area Code

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

Employer: \_\_\_\_\_ Occupation (or Previous Occupation): \_\_\_\_\_

Catholic  Non-Catholic. *Sacraments Received:* Baptism  Date: \_\_\_\_\_ Confirmation  Date: \_\_\_\_\_

Church of Baptism: \_\_\_\_\_  
Name City State

Marital Status:  Married  Single  Divorced  Widowed. Church Of Marriage: \_\_\_\_\_  
Name City State

## **SPOUSE** Please Print \_\_\_\_\_

Name: \_\_\_\_\_ Date of Brth: \_\_\_\_\_  
Last First Middle MAIDEN Day Month Year

E-mail: \_\_\_\_\_ Cell: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation (or Previous Occupation): \_\_\_\_\_

Catholic  Non-Catholic. *Sacraments Received:* Baptism  Date: \_\_\_\_\_ Confirmation  Date: \_\_\_\_\_

Church of Baptism: \_\_\_\_\_  
Name City State

**Dependents or Other Household Members**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_ Confirmation: \_\_\_\_\_

Church of Baptism : \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_ Confirmation: \_\_\_\_\_

Church of Baptism : \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

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Church of Baptism : \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_