



Parish Registration Form

Welcome to the Church of Saint Mary. To complete the registration process, please fill out all pages and return it to the parish office. Additional information is available on our website: www.churchofsaintmary.com. You can also sign up for online giving from the church website. Please email this form back to mcoats@churchofsaintmary.com

For each family member (adults & children) fill in the information below. There is a section for each individual in your family. Use another form if necessary. To save the completed form, right click, select print, destination, change, save as pdf to your computer then email to the Church.

Head of Household

Last Name: _____ First Name: _____

Goes By Name: _____ Maiden Name: _____ Date of Birth: ____/____/____

Title: Mr. Mrs. Ms. Dr. Other _____ Suffix: Jr. Sr. II III Other _____

Address: _____ City: _____ Zip: _____

Primary phone: _____ listed unlisted Secondary phone: _____ listed unlisted

Primary E-mail Address: _____ Gender: Male Female

Marital Status: Catholic Marriage Married Single Separated Divorced Widow/er

Religion: Catholic Baptist Episcopalian Methodist Presbyterian Other _____

Occupation: _____ Employer: _____

Business Telephone if we can contact you at work: _____

Alumni Saint Mary School? No Yes, year _____

Sacramental Information: Please indicate a yes or no and the date (if known) of sacraments received:

Baptism: Yes No Date: _____ Church: _____ City: _____ State: _____

First Communion: Yes No Date: _____ First Penance: Yes No Date: _____

Marriage: Yes No Date: _____ Confirmation: Yes No Date: _____

I (we) are moving to the Church of Saint Mary from: Parish of _____
City/State _____

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Spouse

Last Name (if different from Head of House): _____ **First Name:** _____

Goes By Name: _____ **Maiden Name:** _____

Title: Mr. Mrs. Dr. Other _____ **Suffix:** Jr. Sr. II III Other _____

Cell # _____ listed unlisted **Primary E-mail Address:** _____

Gender: Male Female **Date of Birth:** ____/____/____

Marital Status: Catholic Marriage Married Single Separated Divorced Widow/er

Religion: Catholic Baptist Episcopalian Methodist Presbyterian Other _____

Occupation: _____ **Employer:** _____

Business Telephone if we can contact you at work: _____

Alumni Saint Mary School? No Yes, year _____

Sacramental Information: Please indicate a yes or no and the date (if known) of sacraments received:

Baptism: Yes No Date: _____ Church: _____ City: _____ State: _____

First Communion: Yes No Date: _____ First Penance: Yes No Date: _____

Marriage: Yes No Date: _____ Confirmation: Yes No Date: _____

Family position: Child Other _____

Last Name (if different than Head of Household) _____ **First Name:** _____

Goes By Name: _____ **Maiden Name:** _____

Title: Mr. Miss Ms. Other _____ **Suffix:** Jr. Sr. II III Other _____

Cell # _____ listed unlisted **Primary E-mail Address:** _____

Gender: Male Female **Date of Birth:** ____/____/____

Religion: Catholic Baptist Episcopalian Methodist Presbyterian Other _____

School Attending _____ Grade _____ **H.S. Graduation Year** _____

Alumni St Mary School? No Yes, year _____

Sacramental Information: Please indicate a yes or no and the date (if known) of sacraments received:

Baptism: Yes No Date: _____ Church: _____ City: _____ State: _____

First Communion: Yes No Date: _____ First Penance: Yes No Date: _____

Marriage: Yes No Date: _____ Confirmation: Yes No Date: _____

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Family position: Child Other _____

Last Name (if different than Head of Household) _____ **First Name:** _____

Goes By Name: _____ **Maiden Name:** _____

Title: Mr. Miss Ms. Other _____ **Suffix:** Jr. Sr. II III Other _____

Cell # _____ listed /unlisted **Primary E-mail Address:** _____

Gender: Male Female **Date of Birth:** ____/____/____

Religion: Catholic Baptist Episcopalian Methodist Presbyterian Other _____

School Attending _____ Grade _____ **H.S. Graduation Year** _____

Alumni St Mary School? No Yes, year _____

Sacramental Information: Please indicate a yes or no and the date (if known) of sacraments received:

Baptism: Yes No Date: _____ Church: _____ City: _____ State: _____

First Communion: Yes No Date: _____ First Penance: Yes No Date: _____

Marriage: Yes No Date: _____ Confirmation: Yes No Date: _____

Family position: Child Other _____

Last Name (if different than Head of Household) _____ **First Name:** _____

Goes By Name: _____ **Maiden Name:** _____

Title: Mr. Miss Ms. Other _____ **Suffix:** Jr. Sr. II III Other _____

Cell # _____ listed /unlisted **Primary E-mail Address:** _____

Gender: Male Female **Date of Birth:** ____/____/____

Religion: Catholic Baptist Episcopalian Methodist Presbyterian Other _____

School Attending _____ Grade _____ **H.S. Graduation Year** _____

Alumni St Mary School? No Yes, year _____

Sacramental Information: Please indicate a yes or no and the date (if known) of sacraments received:

Baptism: Yes No Date: _____ Church: _____ City: _____ State: _____

First Communion: Yes No Date: _____ First Penance: Yes No Date: _____

Marriage: Yes No Date: _____ Confirmation: Yes No Date: _____

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Parish Involvement

There are many opportunities for involvement at the Church of Saint Mary. Please view our website, www.churchofsaintmary.com, or write in your interests in the spaces below. Someone will be contacting you with information and to invite you to the Newcomers Brunch.

I (we) would like to opt out of digital media posted from church functions on the Church website.

I (we) would like to be contacted with information on:

Comments/Questions: _____

For office use:

Letter Computer Envelopes Diocese Organizations Scanned/Email "M" Drive

Date received: _____ Entry date: _____ Envelope Number: _____

NOTES: _____
