

ST. BERNARD'S CATHOLIC CHURCH

NEW PARISHIONER REGISTRATION

Last Name:			Date:
Address:			Do you want to receive giving envelopes? Y N
City:	State:	Zip:	

Please fill in as much information as possible. Information for children is on the back side of the form.

	Head of Household	Spouse
Name (First, Middle)		
Maiden Name		
Circle One	Man Woman	Man Woman
Primary Phone		
Email		
Birth Date		
Birth Place		
Occupation		
Religion		

Please fill out as much sacramental information as possible for each individual.

Baptism		
Date		
Sponsors		
Parish		
Priest		
City, State/Province, Country		
1 st Communion		
Date		
Parish		
City, State/Province, Country		
Confirmation		
Date		
Parish		
Sponsor		
Priest/Bishop		
City, State/Province, Country		
Marriage		
Date		
Parish		
Priest		
Witnesses		
City, State/Province, Country		

Interests, Hobbies, Etc.		
Ministry Interests		

Please fill out as much sacramental information as you can for all children under the age of 18. Attach additional pages if necessary.

	Child #1	Child #2	Child #3
Name (First, Middle)			
Circle One	Boy Girl	Boy Girl	Boy Girl
Birth Date			
Birth Place			
School Grade			
Baptism			
Date			
Sponsor			
Parish			
Priest			
City, State/Prov., Ctry.			
1st Communion			
Date			
Parish			
City, State/Prov., Ctry.			
Confirmation			
Date			
Parish			
Priest/Bishop			
Sponsor			
City, State/Prov., Ctry.			
Ministry Interests, Hobbies, Etc.			

	Child #4	Child #5	Child #6
Name (First, Middle)			
Circle One	Boy Girl	Boy Girl	Boy Girl
Birth Date			
Birth Place			
School Grade			
Baptism			
Date			
Sponsor			
Parish			
Priest			
City, State/Prov., Ctry.			
1st Communion			
Date			
Parish			
City, State/Prov., Ctry.			
Confirmation			
Date			
Parish			
Priest/Bishop			
Sponsor			
City, State/Prov., Ctry.			
Ministry Interests, Hobbies, Etc.			