

St. Bernadette Catholic Church

Registration Form

Family Name _____
 Subdivision _____
 Address _____

 City/State/Zip _____

Date _____
 Home Phone _____
 E-mail _____
 E-mail _____

Family Information	Place of Birth City/State/Country	Date of Birth	CATHOLIC Sacraments		
			Baptism (religion)	1st Comm √ If Rec'd	Conf √ If Rec'd
First Names <small>(last names if different from above)</small>					
Husband:					
Wife:					
Are you Married <input type="checkbox"/> Yes <input type="checkbox"/> No		By a Catholic Priest <input type="checkbox"/> Yes <input type="checkbox"/> No			

Others: Children, Grandparents, etc, residing at home	Place of Birth	Gender	Date of Birth	Baptism	1st Comm	Conf

Husband
Occupation:
Firm:
Work Phone:
Cell Phone:
Are you interested in joining a ministry? Yes / No

Wife
Occupation:
Firm:
Work Phone:
Cell Phone:
Are you interested in joining a ministry? Yes / No

For Office Use Only:	
Ministries Interested In:	Envelope #:
	Date Entered: