

Registration for Saint James Catholic Church
(please print)

Family Name _____
(Last) (First) (Spouse)

Title: (please circle) Mr./Mrs Mr. Mrs. Ms. Miss

Address _____ Apt. # _____

City/State _____ Zip _____ Phone _____
(home)

Cell Phone _____ email address: _____

Marital Status (please circle)
 Single Married Separated Divorced Widowed

Needs: _____ Interests: _____

Member Information

	Head	Spouse	Child	Child	Child	Child
Name						
Religion						
Occupation						
Employment						
Bus. Phone						
School Attnd.						
Grade						
Sex	M F	M F	M F	M F	M F	M F
Birthdate:	<u> </u> / <u> </u> / <u> </u> <small>Mo Da. Yr.</small>	<u> </u> / <u> </u> / <u> </u> <small>Mo Da. Yr.</small>	<u> </u> / <u> </u> / <u> </u> <small>Mo Da. Yr.</small>	<u> </u> / <u> </u> / <u> </u> <small>Mo Da. Yr.</small>	<u> </u> / <u> </u> / <u> </u> <small>Mo Da. Yr.</small>	<u> </u> / <u> </u> / <u> </u> <small>Mo Da. Yr.</small>
Baptism (Catholic Church)	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No
Penance	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No
1st Communion	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No
Marriage (Catholic Church)	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No	___Yes ___No

Date Registered: _____