

SAINT MICHAEL THE ARCHANGEL REGISTRATION FORM

Please **PRINT** the information on both sides of this form and check boxes that apply.

All information will be confidential!

Church Envelope number _____

Family Last Name _____ Telephone Number _____

Address _____ City, State, Zip _____

Cell Phones _____ E-Mail Address: _____

MALE ADULT

First Name _____ Middle _____

Religion _____ Birth Date _____

Sacraments Received: Baptism Penance Eucharist Confirmation
Mass Attendance: Regular Occasional Seldom Never
Employment Status: Employed Unemployed Retired Student

Occupation _____ Place of Employment _____

FEMALE ADULT

First Name _____ Middle _____ Maiden Name _____

Religion _____ Birth Date _____

Sacraments Received: Baptism Penance Eucharist Confirmation
Mass Attendance: Regular Occasional Seldom Never
Employment Status: Employed Unemployed Retired Student

Occupation _____ Place of Employment _____

MARITAL STATUS

Circle one: Single Married Divorced Separated Widowed Other

Church of Marriage _____ Date of Marriage _____

City, State _____

If the marriage was celebrated in a non-Catholic Church, was dispensation obtained from a Catholic Bishop? Yes No

***PLEASE FILL OUT BOTH SIDES**

CHILDREN LIVING AT HOME

LIST FULL NAME IF DIFFERENT FROM FAMILY NAME.

Name _____ Middle _____ Birth Date _____

Gender _____ Religion _____ School/Grade _____

Sacraments Received: Baptism Penance Eucharist Confirmation Attend Religious Ed.

Name _____ Middle _____ Birth Date _____

Gender _____ Religion _____ School/Grade _____

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Gender _____ Religion _____ School/Grade _____

Sacraments Received: Baptism Penance Eucharist Confirmation Attend Religious Ed.

OTHER ADULTS LIVING AT HOME

LIST FULL NAME IF DIFFERENT FROM FAMILY NAME.

Name _____ Middle _____ Birth Date _____

Gender _____ Religion _____ Relationship _____

Sacraments Received: Baptism Penance Eucharist Confirmation Marriage

Name _____ Middle _____ Birth Date _____

Gender _____ Religion _____ Relationship _____

Sacraments Received: Baptism Penance Eucharist Confirmation Marriage

If your Mass attendance is occasional, seldom or never, please comment including any suggestions you may care to offer: _____

Remarks: (Include Special Needs/Disabilities) _____
