

St. Pius X Catholic Church – Family Registration

Env: _____

Family Last Name: _____

Date Registered: _____

Address: _____

City _____

Zip _____

Phones: home () _____ listed/unlisted office/cell () _____

Family Title: (circle one) Mr. & Mrs. Dr & Mrs. Mr. Mrs. Ms Miss other: _____

Marital Status (circle one): Single Widowed Divorced Separated Married Catholic Marriage Blessed Marriage Dispensed Marriage

Married? date: _____ Place: _____ Coming here from what parish _____

Member Information: Head(s) of Household:

Name: _____ Occupation: _____
First Middle Initial Last

_____ Disability: Deaf blind physical shut-in Other _____
Date of Birth Religion

Baptized? date: _____ place: _____ First Eucharist? date: _____ Place _____

Confirmed? date: _____ place: _____ Married? date: _____ Place: _____

SPOUSE:

Name: _____ Occupation: _____
First Middle Initial Maiden Name

_____ Disability: Deaf blind physical shut-in Other _____
Date of Birth Religion

Baptized? date: _____ place: _____ First Eucharist? date: _____ Place _____

Confirmed? date: _____ place: _____ **CHILDREN AND OTHERS LIVING AT ADDRESS ON BACK:**

Others living at address:

Name: First: _____ M I: _____ Last if different _____ (Son/Daughter/Other)

Date of Birth _____ **Place of Birth** _____ **Disability:** Deaf blind physical shut-in Other _____

Baptism date: _____ **place:** _____ **First Eucharist: date:** _____ **Place** _____

Confirmation date: _____ **place:** _____ **Grade:** _____ **School:** _____

Name: First: _____ M I: _____ Last if different _____ (Son/Daughter/Other)

Date of Birth _____ **Place of Birth** _____ **Disability:** Deaf blind physical shut-in Other _____

Baptism date: _____ **place:** _____ **First Eucharist: date:** _____ **Place** _____

Confirmation date: _____ **place:** _____ **Grade:** _____ **School:** _____

Name: First: _____ M I: _____ Last if different _____ (Son/Daughter/Other)

Date of Birth _____ **Place of Birth** _____ **Disability:** Deaf blind physical shut-in Other _____

Baptism date: _____ **place:** _____ **First Eucharist: date:** _____ **Place** _____

Confirmation date: _____ **place:** _____ **Grade:** _____ **School:** _____

Name: First: _____ M I: _____ Last if different _____ (Son/Daughter/Other)

Date of Birth _____ **Place of Birth** _____ **Disability:** Deaf blind physical shut-in Other _____

Baptism date: _____ **place:** _____ **First Eucharist: date:** _____ **Place** _____

Confirmation date: _____ **place:** _____ **Grade:** _____ **School:** _____