

Last Name _____

First Name _____

Religion _____ Birth date ____ / ____ / ____
Month / Day / Year

Baptized 1st Communion Confirmed

Spouse		
Last Name _____		
First Name _____		
Religion _____	Birth date ____ / ____ / ____ Month / Day / Year	
Baptized <input type="checkbox"/>	1st Communion <input type="checkbox"/>	Confirmed <input type="checkbox"/>

Address _____ City / Zip _____

Phone _____ Unlisted? Yes No Previous parish _____
Name City / State

Marital Status Single Married Widowed Divorced Church of Marriage _____
Name City / State

Minor Children	Sex	Religion	Birth date	Baptized	Communion	Confirmed	Grade
1.	M F		/ /	Yes No	Yes No	Yes No	
2.	M F		/ /	Yes No	Yes No	Yes No	
3.	M F		/ /	Yes No	Yes No	Yes No	
4.	M F		/ /	Yes No	Yes No	Yes No	
5.	M F		/ /	Yes No	Yes No	Yes No	

Today's Date _____

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If you would be open to a phone call or personal visit from a parishioner who is a member of our Welcoming Committee, please provide the following information:

Signature

Date

Address

Phone

I do not wish to be contacted.

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