ST. JOHN'S PARISH REGISTRATION FORM Registration Date____/____ Envelope # _____ OFFICE USE ONLY Mailing Names_____ Address_____Zip____ Publish Address Y Ν Primary Phone_____ Publish Phone Ν Υ Family Email Publish Email Ν Υ Previous Parish Add Flocknote Ν **ADULT FAMILY MEMBERS** 1. MALE-First Middle & Last Name_____ Birthdate / / Preferred Name Catholic Y N Other_____ Email_____ Cell Phone____ Baptism Y N Parish and Town Confirmation Y N Parish and town Convert Y N______ () Married () Single () Widowed () Divorced () Separated Date of Marriage____/____Place_____ _____Town/State_____ Married Before? Husband Wife Both 2. FEMALE-First Middle and Last Name _____ Maiden Name______ Birthdate____/___/____ Preferred Name Catholic Y N Other_____ _____Email_____ Cell Phone Y N Parish and Town_____ Baptism Confirmation Y N Parish and town Convert Y N CHILDREN LIVING AT HOME (OR STILL IN COLLEGE) or OTHER ADULTS LIVING IN SAME HOUSEHOLD First, Middle Where & Date Confirmation School Name Grade CCD? Sex Birth First & Last Name Date Baptized? Comm