

ST. JOSEPH PARISH, EAST BRISTOL REGISTRATION FORM

Last Name _____ Address _____ PO Box _____
 City _____ Zip _____
 Phone _____ Cell Phone _____ Email _____

Please fill in the form below for ALL your family. (Note: Marital status—Married, Single, Widowed, Separated, or Divorced)

PERSON FILLING OUT FORM

SPOUSE (IF APPLICABLE)

First Name & Initial _____
 Maiden Name of Wife _____
 Date of Birth _____
 Religion _____
 Occupation _____
 Work Phone _____
 Marital Status _____
 Date Married _____ Church _____

CHILDREN LIVING AT HOME (Please give their last name if different than yours.)

| Name | Attending St. Joseph Rel. Ed. Y/N | Grade | Sex M/F | Birth Date | Baptism Y/N; Church of Baptism | FE Y/N | REC Y/N | CONF Y/N |
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FE = First Eucharist REC = Reconciliation CONF = Confirmation Y = Yes N = No

Disabled living at home / Other home bound _____
 Nature of disability _____
 Name _____ Age _____
 Other adults living in home _____
 In college or other school _____

Do you wish to receive the Catholic Herald Newspaper Yes No

Please return this form to: St. Joseph Catholic Church, 1935 Hwy. V., Sun Prairie 53590 (608-846-5726)