

**St. Joseph Catholic Church** 600 N. Russell Street - Marion, IL 62959-1679 (618) 993-3194 email:rgm13@midamer.net

(PLEASE TYPE, PRINT OR WRITE AS LEGIBLY AS POSSIBLE)

# REGISTRATION

1. Family/Last Name \_\_\_\_\_

Date \_\_\_\_\_

2. Address \_\_\_\_\_ Apt \_\_\_\_\_

Phone \_\_\_\_\_

3. City & Zip Code \_\_\_\_\_

Check  Listed  Unlisted

4. Male's First & Middle Name \_\_\_\_\_

Cell Phone \_\_\_\_\_

5. Birth Date \_\_\_\_\_ Occupation \_\_\_\_\_

email \_\_\_\_\_

6. Religion/Church Affiliation (Be specific) \_\_\_\_\_

7. Marital Status:  Single  Married  Separated  Divorced  Widow(er)

Env #

8. (Yes or No)  Baptized  1st Communion  Confirmed

9. Female's First & Middle Name \_\_\_\_\_

10. If married, Maiden Name \_\_\_\_\_

11. Birth Date \_\_\_\_\_ Occupation \_\_\_\_\_

12. Religion/church Affiliation (Be specific) \_\_\_\_\_

13. Marital Status:  Single  Married  Separated  Divorced  Widow(er)

14. (Yes or No)  Baptized  1st Communion  Confirmed

15. If presently married, were you married IN THE CATHOLIC CHURCH or in another Church with the PERMISSION of the Catholic Church? \_\_\_\_\_ (Y/N) \_\_\_\_\_ Date of Marriage

16. ADULTS/CHILDREN PRESENTLY LIVING AT HOME. List the oldest to the youngest, please. List last name if different from family name.

First Name & Initial	Birth Date (Mo/Yr)	Baptized (Mo/Yr)	1st Comm (M/Y)	Confirmed (M/Y)	School Attending	Grade

**USE OTHER SIDE FOR ADDITIONAL COMMENTS**