

The Catholic Church in East St. James
Family Registration Form

_____ St Michael

_____ St Joseph

_____ Most Sacred Heart of Jesus

Family Registration			
Family ID #:		Today's Date: ____/____/____	
Family Name:			
Head:	Last: _____	First: _____	Title: _____ Suffix: _____
Spouse:	Last: _____	First: _____	Title: _____
Name formats used in mailings:		Mailing Name: _____ Ex: Mr. and Mrs. John Smith	
Informal Salutation: _____ Ex: John & Mary		Formal: _____ Ex: Mr. and Mrs. Smith	
Street Address Line 1: _____		Street City/State: _____	
Street Address Line 2: _____		Street Zip: _____	
Geo. Area Number: _____	Registered: _____	Family Status: _____	
Phone: _____	Description: Home/Office/Cell/Other _____	Unlisted? Yes/No _____	
Phone: _____	Description: Home/Office/Cell/Other _____	Unlisted? Yes/No _____	
Email: _____	Send Email? _____	Parish: _____	
Mailing Address: (if different)	Line 1: _____	City/State: _____	
	Line 2: _____	Zip: _____	
Alternate Address:		Send mail to alternate address? _____	
Line 1: _____		City/State: _____	
Line 2: _____		Zip: _____	
Email: _____		Send to Email instead of mail when possible? _____	
Date range you expect to be at this address: From: _____		(Month/Day) To: _____ (Month/Day)	
Alternate Address Remarks: _____			
Member Registration			
Member Name:			
Last Name: _____	First Name: _____	Middle: _____	
Nickname: _____	Title: _____	Suffix: _____	
Maiden Name: _____			
Name formats used in mailings:		Mailing Name: _____ Ex: Jeanne Van Loon	
Informal Salutation: _____ Ex: Jeanne		Formal Salutation: _____ Ex: Mrs. Van Loon	
Personal Information:		Relationship: _____	Type: _____
Grade/Degree: _____	Gender: _____	Marital Status: _____	
Language: _____	Ethnicity: _____	Birthdate: _____	
Religion: _____	Handicap: _____	Occupation: _____	
Race: _____			
Location: _____			
Phone: _____	Type: _____	Unl: Y/N _____	Email: _____ Type: _____ Prefer Email? Y/N _____
Birthplace:			
Father: _____		Mother: _____ Maiden Name: _____	
Baptism: Performed by: _____	Name/Extra Info: _____	Date: _____	Status: Approx. / Yes / No _____
Church Name: _____			
1st Comm: Performed by: _____	Name/Extra Info: _____	Date: _____	Status: Approx. / Yes / No _____
Church Name: _____			
Confirm: Performed by: _____	Name/Extra Info: _____	Date: _____	Status: Approx. / Yes / No _____
Church Name: _____			
NonSac Marri Name/Extra Info: Performed by: _____	Name/Extra Info: _____	Date: _____	Status: Approx. / Yes / No _____
Church Name: _____			
Marriage: Performed by: _____	Name/Extra Info: _____	Date: _____	Status: Approx. / Yes / No _____
Church Name: _____			
I would like to volunteer for the following ministries:			

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_____ St Joseph

_____ Most Sacred Heart of Jesus

Member Registration			
Member Name:			
Last Name: _____	First Name: _____	Middle: _____	
Nickname: _____	Title: _____	Suffix: _____	
Maiden Name: _____			
Name formats used in mailings:			
Informal Salutation: _____	<i>Ex: Jeanne</i>	Mailing Name: _____	<i>Ex: Jeanne Van Loon</i>
		Formal Salutation: _____	<i>Ex: Mrs. Van Loon</i>
Personal Information:			
Grade/Degree: _____	Relationship: _____	Type: _____	
Language: _____	Gender: _____	Marital Status: _____	
Religion: _____	Ethnicity: _____	Birthdate: _____	
Race: _____	Handicap: _____	Occupation: _____	
Location: _____			
Phone: _____ Type: _____ Unl: Y/N Email: _____ Type: _____ Prefer Email?Y/N			
Birthplace:			
Birth Father: _____		Birth Mother: _____ Maiden Name: _____	
Baptism: Name/Extra Info: _____ Date: _____ Status: <u>Approx. / Yes / No</u>			
Performed by: _____		Church Name: _____	
1st Comm: Name/Extra Info: _____ Date: _____ Status: <u>Approx. / Yes / No</u>			
Performed by: _____		Church Name: _____	
Confirm: Name/Extra Info: _____ Date: _____ Status: <u>Approx. / Yes / No</u>			
Performed by: _____		Church Name: _____	
NonSac Marri Name/Extra Info: _____ Date: _____ Status: <u>Approx. / Yes / No</u>			
Performed by: _____		Church Name: _____	
Marriage: Name/Extra Info: _____ Date: _____ Status: <u>Approx. / Yes / No</u>			
Performed by: _____		Church Name: _____	
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