For office	use	only	
Parish ID.			

i unish	10.	
CODE:		

REGISTRATION FORM FOR MEMBERSHIP IN SAINT DENIS PARISH

Please Print All Information and Return to Parish Office

DATE: _____

(Head of Household - Husband name unless single)						Last Name Only:							
Head of Household Full Name:						Spouse Full Name:	Ma	Maiden Name:					
Marital Status: S/M/W/ (single, married, widow, divorced, living t	•	Wed	ding Date		Name and location of Church:			Married in the Catholic Church? Yes/No					
Phone: (Home) (Head of Househo						d: Cell) (Spouse: Cell)							
Street Address:						City/State/Zip:							
Email:						(Spouse) Email:							
Occupation					(Spouse) Occupation:								
Date of Birth:	Relig	ion:				(Spouse) Date of Birth:	Relig	Religion:					
Church of Baptism:		otism s/No	Commun Yes/No	-	Confirmation: Yes / No	(Spouse) Church of Baptism:	Bapt Yes/		Communion Yes/No	Confirmation: Yes / No			
Church of Baptism Location	:					Church of Baptism Location:							
Contribution Envelope Req	uest: We	ekly	_ Monthly		_ EFT (For	Electronic Funds Transfer, plea	ase go to v	/ebs		call rectory r assistance)			

Additional House Member Information

*IF YOUR CHILDREN ARE CURRENTLY ENROLLED IN OUR RELIGIOUS EDUCATION PROGRAM, PLEASE CHECK 🗹 BOX BEFORE THEIR NAME WITH Y/N.

Enrolled inRelig.	HOUSEHOLD MEMBERS		DATE OF BIRTH		RELIGION SACRAMENTS APPROXIMATE DATES Month/Day/Year		DATES	CHURCH OF BAPTISM ATUS		SCHOOL (IF CHILD)	GRADE		
Y/N	FIRST/MIDDLE/LAST	M/F	Μ	D	Υ		BAPT	COMM	CONF		S/M		
							/ /	//	/ /				
							/ /	//	/ /				
							//	//	/ /				
							/ /	//	/ /				