

Saints Martha and Mary Parish

Member Registration Form

Office use only
ID# _____
Reg. Date _____
Entered by _____
Ltr _____ CC _____
FN _____ FD _____

FAMILY INFORMATION

Household Mailing Name (ex: Mr. & Mrs. John Doe) _____

Street Address: _____

City

State

ZipCode

Township: _____

Phone Number: Home _____ His Cell _____ Her Cell _____

[] unlisted

[] unlisted

[] unlisted

Emergency Contact: _____ Phone Number _____

Do you wish to be included in the Parishioner Directory (Yes / No)

Check all that you would like us to include: Name _____ Address _____ Phone Number _____ Email _____

Church Financial Support:

Do you prefer : online contributions _____ weekly envelopes _____

(To sign up for online contributions, visit www.stsmarthaandmaryparish.org & click on the Support Your Parish Faith Direct Box.)

Marital status: _____

If married please complete the following: Date of Marriage _____

Is your Marriage recognized by the Catholic Church [] Yes or [] No

Church of Marriage _____ City & State _____

FAMILY MEMBER #1 (Head of Household)

Last Name _____ Date of Birth _____

First Name _____ Title (Mr,Mrs,Dr,Ms) _____ Gender _____

Middle Name _____ Suffix (Sr,Jr,II) _____

Maiden Name _____ Nickname _____

Family Relationship _____ Religion _____ Marital Status _____

Occupation _____ Employer _____

Special Talents/Hobbies willing to share _____

Email Address: _____

Special Needs/Disability _____

Sacraments Received:

Baptism (Yes/No) Religion _____ Church _____ Date of Baptism _____

City/State _____

First Communion (Yes/No) Church _____

City/State _____

Confirmation (Yes/No) Church _____

City/State _____

FAMILY MEMBER #2 (Spouse)

Last Name _____ **Date of Birth** _____
First Name _____ **Title (Mr,Mrs,Dr,Ms)** _____ **Gender** _____
Middle Name _____ **Suffix (Sr,Jr,II)** _____
Maiden Name _____ **Nickname** _____

Family Relationship _____ **Religion** _____ **Marital Status** _____
Occupation _____ **Employer** _____
Special Talents/Hobbies willing to share _____
Email Address: _____
Special Needs/Disability _____

Sacraments Received:

Baptism (Yes/No) Religion _____ Church _____ Date of Baptism _____
City/State _____
First Communion (Yes/No) Church _____
City/State _____
Confirmation (Yes/No) Church _____
City/State _____

FAMILY MEMBER #3 (Child)

Last Name _____ **Date of Birth** _____
First Name _____ **Title (Mr,Mrs,Dr,Ms)** _____ **Gender** _____
Middle Name _____ **Suffix (Sr,Jr,II)** _____
Maiden Name _____ **Nickname** _____

Family Relationship _____ **Religion** _____ **Marital Status** _____
Occupation _____ **Employer** _____
Special Talents/Hobbies willing to share _____
Email Address: _____
Special Needs/Disability _____

Sacraments Received:

Baptism (Yes/No) Religion _____ Church _____ Date of Baptism _____
City/State _____
First Communion (Yes/No) Church _____
City/State _____
Confirmation (Yes/No) Church _____
City/State _____

FAMILY MEMBER #4 (Child)

Last Name _____ **Date of Birth** _____
First Name _____ **Title** (Mr,Mrs,Dr,Ms) _____ **Gender** _____
Middle Name _____ **Suffix** (Sr,Jr,II) _____
Maiden Name _____ **Nickname** _____

Family Relationship _____ **Religion** _____ **Marital Status** _____
Occupation _____ **Employer** _____
Special Talents/Hobbies willing to share _____
Email Address: _____
Special Needs/Disability _____

Sacraments Received:

Baptism (Yes/No) **Religion** _____ **Church** _____ **Date of Baptism** _____
City/State _____
First Communion (Yes/No) **Church** _____
City/State _____
Confirmation (Yes/No) **Church** _____
City/State _____

FAMILY MEMBER #5 (Child)

Last Name _____ **Date of Birth** _____
First Name _____ **Title** (Mr,Mrs,Dr,Ms) _____ **Gender** _____
Middle Name _____ **Suffix** (Sr,Jr,II) _____
Maiden Name _____ **Nickname** _____

Family Relationship _____ **Religion** _____ **Marital Status** _____
Occupation _____ **Employer** _____
Special Talents/Hobbies willing to share _____
Email Address: _____
Special Needs/Disability _____

Sacraments Received:

Baptism (Yes/No) **Religion** _____ **Church** _____ **Date of Baptism** _____
City/State _____
First Communion (Yes/No) **Church** _____
City/State _____
Confirmation (Yes/No) **Church** _____
City/State _____

FAMILY MEMBER #6 (Child)

Last Name _____ **Date of Birth** _____
First Name _____ **Title (Mr,Mrs,Dr,Ms)** _____ **Gender** _____
Middle Name _____ **Suffix (Sr,Jr,II)** _____
Maiden Name _____ **Nickname** _____

Family Relationship _____ **Religion** _____ **Marital Status** _____
Occupation _____ **Employer** _____
Special Talents/Hobbies willing to share _____
Email Address: _____
Special Needs/Disability _____

Sacraments Received:

Baptism (Yes/No) Religion _____ Church _____ Date of Baptism _____
City/State _____
First Communion (Yes/No) Church _____
City/State _____
Confirmation (Yes/No) Church _____
City/State _____

FAMILY MEMBER #7 (Child)

Last Name _____ **Date of Birth** _____
First Name _____ **Title (Mr,Mrs,Dr,Ms)** _____ **Gender** _____
Middle Name _____ **Suffix (Sr,Jr,II)** _____
Maiden Name _____ **Nickname** _____

Family Relationship _____ **Religion** _____ **Marital Status** _____
Occupation _____ **Employer** _____
Special Talents/Hobbies willing to share _____
Email Address: _____
Special Needs/Disability _____

Sacraments Received:

Baptism (Yes/No) Religion _____ Church _____ Date of Baptism _____
City/State _____
First Communion (Yes/No) Church _____
City/State _____
Confirmation (Yes/No) Church _____
City/State _____