

Catholic Community of St. Jude Parish Registration Form

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| Family Name: | Today's Date: | Envelope Number: |
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| | Are you interested in Electronic Contributions? Yes No |
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|-------------------------|----------|----------|------|-------|-----|--|
| Principal Residence: | | | | | | |
| House number and Street | Apt. No. | P.O. Box | City | State | Zip | |

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|-------------|-----------|-----|----|
| Home Phone: | Unlisted? | Yes | No |
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| Family Email Address: |
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| Secondary (Vacation) Residence: |
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| Months in Residence: | | | | | | |
| House number and Street | Apt. No. | P.O. Box | City | State | Zip | |

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| Previous Parish: | | |
| Name | City | State |

| Adults (first name and Initial) | Religion | Birth date | Marital Status | Married by a priest? | Anniversary | Baptized | Eucharist | Confirmed | Education |
|---------------------------------|----------|------------|----------------|----------------------|-------------|----------|-----------|-----------|-----------|
| Husband/Male: | | | | | | | | | |

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|-------------|--------------|----------------|
| Work Phone: | Cell Phone: | Email: |
| Employer: | Occupation : | Special Needs: |

| Wife/Female: | Religion | Birth date | Baptized | Eucharist | Confirmed | Education |
|---------------------|----------|------------|----------|-----------|-----------|-----------|
| Maiden Name: | | | | | | |

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|-------------|--------------|----------------|
| Work Phone: | Cell Phone : | Email : |
| Employer: | Occupation : | Special Needs: |

| Dependents: First and Middle Names (include last name if different) | Male/Female | Birth date | Religion | Grade | School District | Baptised | Eucharist | Confirmed | Special Needs |
|--|-------------|------------|----------|-------|-----------------|----------|-----------|-----------|---------------|
| Name: | | | | | | | | | |
| Name: | | | | | | | | | |
| Name: | | | | | | | | | |
| Name: | | | | | | | | | |
| Name: | | | | | | | | | |

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| To whom do you prefer your mail addressed to: | Would you like to be listed in the Parish Directory? Yes No | Pictorial Directory? Yes No |
| | Listing is: Last name, Adults' first names, address and phone. | |
| | Your preference: | |