St. Roch Catholic Church Registration Form

Date:	
Family Name:	Address: City: Zip:
Phone: Env. No.	Subdivision:
Husband Information: Name:	**Wife Information:** Name: Maiden Name:
Date of Birth:	Date of Birth:
Religion:	Religion:
Baptism:	Baptism:
First Communion:	First Communion:
Confirmation:	Confirmation:
Marriage Date: Place: By a Priest:	
Other:	Other:
Handicapped:	Handicapped:
Name of Employer:	Name of Employer:
Employer Phone:	Employer Phone:
Occupation:	Occupation:

Children's Names:	Sex	Dates of Birth	Baptism	First Communion	Reconcili-ation	Confirm-ation	School Grade	Other Adults Living at Home:
								Name:
								Relationship:
								Birth Date:
								Other Info: