

ST. GERARD CHURCH REGISTRATION FORM

Office Use:
Env# _____

Updated File:

DATE: _____

FAMILY LAST NAME: _____

ADDRESS: (Include Apt. #): _____

CITY: _____ STATE: _____ ZIP: _____

PRIMARY PHONE #: _____ Listed: ___ Unlisted: ___ Cell#: _____

PRIMARY EMAIL ADDRESS: _____

MARITAL STATUS: Catholic Marriage _____ Civil Marriage _____ Date of Marriage _____
Single _____ Widowed _____ Separated _____ Divorced _____

REGISTRANT

SPOUSE

FIRST NAME _____

MAIDEN NAME _____

LAST NAME (*If different*) _____

BIRTHDATE (Mo/Day/Year) _____

RELIGION _____

OCCUPATION _____

WORK PHONE# _____

SACRAMENTS RECEIVED (Please circle)

Baptism	YES/NO	YES/NO
1 st Communion	YES/NO	YES/NO
Confirmation	YES/NO	YES/NO

SUNDAY ENVELOPES: Use Envelopes _____ Give On-line _____ Will Not Use Envelopes _____
Receive Yearly Envelopes _____ Wish To Receive Envelopes _____

NAME OF PREVIOUS PARISH: _____ CITY/STATE _____

COMPLETE THE FOLLOWING FOR CHILDREN LIVING AT HOME:

<u>Name: First & Last</u>	<u>Birthdate</u>	<u>Baptism</u> Yes/No	<u>1st Comm.</u> Yes/No	<u>Conf.</u> Yes/No	<u>School</u> <u>Attending</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

WHEN COMPLETED, PLEASE DROP IN COLLECTION BASKET, AT PARISH OFFICE OR MAIL:
240 W. Robb Ave., Lima, OH 45801. Email: cheryl@stgerardchurch.org FAX: 419-225-2231