



**St. Vincent Martyr Parish**

**Madison, New Jersey**

**PARISH REGISTRATION FORM**

*Please Print Clearly*

Family Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City and Zip: \_\_\_\_\_

Mailing Address: (If Different) \_\_\_\_\_

Date: \_\_\_\_\_

Giving Method: Faith Direct\*

Dir. Deposit

Envelope

Env.# \_\_\_\_\_ (if known)

Preferred Phone: \_\_\_\_\_

Preferred Email: \_\_\_\_\_

Language Spoken in Home: \_\_\_\_\_

Head(s) of Household First Name, Middle Initial, Informal Name, Last (if different than Family Name)	Single Married Widow Divorced Separated	Gender M / F	Date of Birth M/D/Yr	Religion Catholic Protestant Jewish Other	Baptized	1 <sup>st</sup> Comm.	Confirmed	Role in Household	
					Yes No	Yes No	Yes No	Wife Husband Child Other	Self Stepparent Single Parent Grandparent
1.					Y/N	Y/N	Y/N		
2.					Y/N	Y/N	Y/N		

**Others below:** Dependent Children; Adult Children -Family Home is their permanent address; Other Adults who live in the home

First Name, Last Name

3.					Y/N	Y/N	Y/N	
4.					Y/N	Y/N	Y/N	
5.					Y/N	Y/N	Y/N	
6.					Y/N	Y/N	Y/N	
7.					Y/N	Y/N	Y/N	

Name #1 Occupation: \_\_\_\_\_ Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Name #2 Occupation: \_\_\_\_\_ Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Name #3 Occupation: \_\_\_\_\_ Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Name #4 Occupation: \_\_\_\_\_ Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Name #5 Occupation: \_\_\_\_\_ Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

## REGISTRATION INSTRUCTIONS

Thank you for joining our Parish.

Please follow these guidelines to ensure accurate handling of your information:

1. Please print clearly.
2. Please answer all the questions that apply to your family.
3. If you choose not to answer a question, please place an X in the space provided.
4. If you need assistance or have any questions concerning the Registration Form, please contact the Maribeth at 973 377 4000 ex 106.
5. Please return the completed form as soon as possible. You can choose to send the form by mail, put it in the collection basket, or complete the form online.

**To complete online go to  
[www.svmnj.org](http://www.svmnj.org)**

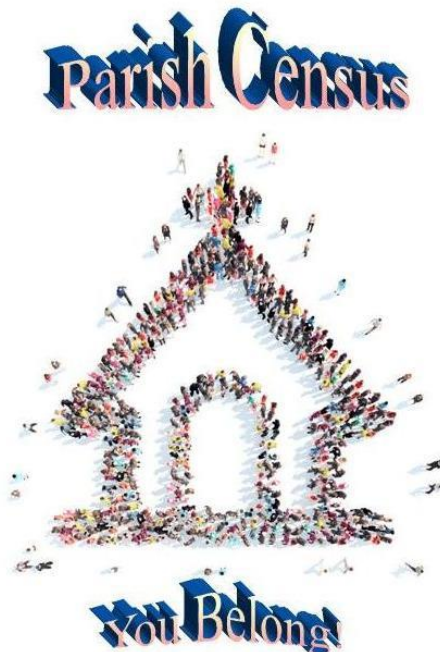
Thank you!

St. Vincent Martyr Parish  
26 Green Village Road  
Madison, NJ 07940  
973 377 4000



\*To sign up and create an account, go to:

[www.faithdirect.net](http://www.faithdirect.net)  
St. Vincent Martyr code NJ740



Dear New Parishioner,

We are happy to welcome you to our parish family of Saint Vincent Martyr. We look forward to getting to know you.

The information you provide will help us to plan ministries and activities to meet the spiritual needs of our Parish Family. **Be assured that all information provided will be held in strictest confidence.**

We thank you for registering with our parish. Remember that every person is important to our parish mission, to share the love of Jesus Christ.

You are our Family – You Belong!

In Christ,

St Vincent Martyr Welcoming Committee

“For this reason I kneel before the Father, from whom every family in heaven and on earth is named.” Ephesians 3: 15