



ST. JOHN VIANNEY CATHOLIC CHURCH
15176 Blessed Mother Blvd., Fishers, IN 46037

www.sjvfishers.com 317-485-0150

Parish Registration Form

DATE _____

The following information will help us to better serve you and your family:

Family Name _____ Phone _____ Unlisted _____

Home Address _____ City _____ State _____ Zip _____

Email Address _____

Head of Household:

First Name _____ Mr. _____ Mrs. _____ Ms. _____ Dr. _____ Birth Date: _____

Place of Employment _____ Occupation _____

Work Phone _____ Cell Phone _____

Religion _____ Baptized? Yes _____ No _____ Confirmed? Yes _____ No _____

In what Parish were you last registered? (*name, city & state*) _____

Spouse (if applicable):

First Name _____ Mr. _____ Mrs. _____ Ms. _____ Dr. _____ Birth Date: _____

Place of Employment _____ Occupation _____

Work Phone _____ Cell Phone _____

Religion _____ Baptized? Yes _____ No _____ Confirmed? Yes _____ No _____

In what Parish were you last registered? (*name, city & state*) _____

Marital Status: Single _____ Engaged _____ Married _____ Divorced _____ Widowed _____

Divorced & Remarried _____ Seeking Annulment _____

If married, was your marriage blessed in the Catholic Church? Yes _____ No _____

Date of Marriage _____ Maiden Name _____

Special Needs: Does anyone in your immediate household have special challenges? Yes ___ No ___
(e.g. wheelchair, hearing, sight, shut-in, etc.)

Do you have a family member serving in the US Military? _____

Sacramental Records:

Please complete this information for each person under the age of 22 in your household. List the eldest first and include full names (including last names *if* different from the family name). Check all sacraments that the individual has received.

Name	Birth Date	Male/Female	Grade	Baptism Yes/No	1st Eucharist Yes/No	Confirmation Yes/No

PHOTO RELEASE & NEWSLETTER SUBSCRIPTION

I _____ give my consent and understand that photos of my child(ren) (*names will not be used*) may be published in the following: Parish Media (Website, Newsletters, Bulletin), The Catholic Moment, Facebook and Instagram.

Send me the parish newsletter by email so I may keep up with all of the parish happenings.

PARENT SIGNATURE **DATE** **PARENT SIGNATURE** **DATE**

ADDITIONAL INFORMATION:

HOW DID YOU HEAR ABOUT ST. JOHN VIANNEY? _____

WHY DID YOU JOIN ST. JOHN VIANNEY? _____