

NEW _____
 UPDATE _____
 Reason for Update:
 Marriage _____
 Address Change _____
 Add. Fam. Mem. _____

St. James Parish
Family Registration
 119 W. Chestnut St
 Washington, PA 15301
 724-225-1425 www.stjameswashpa.org

Office Use Only
 Reg. Date _____
 Entered By _____
 Envelope # _____
 Env. Sent _____
 Neighborhood _____
 Letter _____

General Information

Family Name: _____

Mailing Name (i.e. Mr. & Mrs. John Doe) _____

Physical Address _____

Primary Phone Number: _____

E-mail Address: _____

Mailing address (if different than physical address): _____

Marital Status: _____

If married, please complete the following:

Is your marriage recognized by the Catholic Church? yes no Date of Marriage: _____

Name of Church: _____ City and State: _____

INDIVIDUAL INFORMATION

Head of Household

First Name: _____ Middle Name: _____ Nick Name: _____ Last Name: _____

Maiden Name: _____ Gender: M / F Religion: _____ (if Different from Family Name)

Date of Birth _____ Employer: _____ Occupation: _____

SACRAMENTS:

Baptized: Y/N Church: _____ City & State: _____

Eucharist: Y/N Church: _____ City & State: _____

Confirmed: Y/N Church: _____ City & State: _____

Ministries: _____

Talents: _____

Single _____
Divorced _____
Widow _____

SPOUSE

First Name: _____ Middle Name: _____ Nick Name: _____ Last Name: _____

Maiden Name: _____ Gender: M / F Religion: _____ (if Different from Family Name)

Date of Birth _____ Employer: _____ Occupation: _____

SACRAMENTS:

Baptized: Y/N Church: _____ City & State: _____ Date: _____

Eucharist: Y/N Church: _____ City & State: _____

Confirmed: Y/N Church: _____ City & State: _____

Ministries: _____

Talents: _____

CHILDREN or ADDITIONAL ADULTS LIVING IN THE HOME

1. Family Relationship: _____

First Name: _____ Middle Name: _____ Nick Name: _____ Last Name: _____

Date of Birth _____ Gender: M / F Religion: _____ (if Different from Family Name)

SACRAMENTS:

Baptized: Y/N Church: _____ City & State: _____

Eucharist: Y/N Church: _____ City & State: _____

Confirmed: Y/N Church: _____ City & State: _____

Ministries: _____ Talents: _____

2. Family Relationship: _____

First Name: _____ Middle Name: _____ Nick Name: _____ Last Name: _____

Date of Birth _____ Gender: M / F Religion: _____ (if Different from Family Name)

SACRAMENTS:

Baptized: Y/N Church: _____ City & State: _____

Eucharist: Y/N Church: _____ City & State: _____

Confirmed: Y/N Church: _____ City & State: _____

Ministries: _____ Talents: _____

3. Family Relationship: _____

First Name: _____ Middle Name: _____ Nick Name: _____ Last Name: _____

Date of Birth _____ Gender: M / F Religion: _____ (if Different from Family Name)

SACRAMENTS:

Baptized: Y/N Church: _____ City & State: _____

Eucharist: Y/N Church: _____ City & State: _____

Confirmed: Y/N Church: _____ City & State: _____

Ministries: _____ Talents: _____

4. Family Relationship: _____

First Name: _____ Middle Name: _____ Nick Name: _____ Last Name: _____

Date of Birth _____ Gender: M / F Religion: _____ (if Different from Family Name)

SACRAMENTS:

Baptized: Y/N Church: _____ City & State: _____

Eucharist: Y/N Church: _____ City & State: _____

Confirmed: Y/N Church: _____ City & State: _____

Ministries: _____ Talents: _____