



# Basilica of Sts. Peter & Paul

## Parish Registration Form

Please fill out and return to the parish office: [office@stspeterandpaulbasilica.com](mailto:office@stspeterandpaulbasilica.com)

Revised 10/18/19

### Head of Household

Last Name: \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Maiden Name: (If Female) \_\_\_\_\_

Title:  Mr.  Mrs.  Ms.  Dr. Suffix: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address: (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_

Occupation \_\_\_\_\_ Religion \_\_\_\_\_

Marital Status:  Single  Engaged  Married  Divorced  Widowed

Sacraments Received:  Baptized  1st Communion  Confirmation

Catholic Marriage or  Civil Marriage Date \_\_\_\_\_

I plan to contribute via:  Online Giving  Using pre-labeled envelopes  I will fill out blank envelopes at church

### Spouse/Other Adult

Last Name: \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Maiden Name: (If Female) \_\_\_\_\_

Title:  Mr.  Mrs.  Ms.  Dr. Suffix: \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_

Occupation \_\_\_\_\_ Religion \_\_\_\_\_

Marital Status:  Single  Engaged  Married  Divorced  Widowed

Sacraments Received:  Baptized  1st Communion  Confirmation

Catholic Marriage or  Civil Marriage Date \_\_\_\_\_

Please complete the next page for children.

# Child

Gender  Male  Female

Last Name: \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Suffix: \_\_\_\_\_

Relation to Head of Household  Child  Stepchild  Grandchild  Other \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_

Religion \_\_\_\_\_

Sacraments Received:  Baptized  1st Communion  Confirmation

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# Child

Gender  Male  Female

Last Name: \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Suffix: \_\_\_\_\_

Relation to Head of Household  Child  Stepchild  Grandchild  Other \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_

Religion \_\_\_\_\_

Sacraments Received:  Baptized  1st Communion  Confirmation

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# Child

Gender  Male  Female

Last Name: \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Suffix: \_\_\_\_\_

Relation to Head of Household  Child  Stepchild  Grandchild  Other \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_

Religion \_\_\_\_\_

Sacraments Received:  Baptized  1st Communion  Confirmation

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# Child

Gender  Male  Female

Last Name: \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Suffix: \_\_\_\_\_

Relation to Head of Household  Child  Stepchild  Grandchild  Other \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place \_\_\_\_\_

Religion \_\_\_\_\_

Sacraments Received:  Baptized  1st Communion  Confirmation

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