

Today's Date _____

Envelope # _____

St. Martin de Porres Parish Registration Form

HEAD OF HOUSEHOLD

Last Name _____ First Name _____ Middle Name _____

Title: Mr. _____ Mrs. _____ Ms. _____ Miss _____ Dr. _____ **Suffix:** Sr. _____ Jr. _____ II _____ III _____ Other _____

Maiden Name (if applicable) _____ Prior Parish _____

Home Phone _____ Cell Phone _____

Street Address _____

City _____ State _____ Zip Code _____

Religion _____ Date of Birth _____ City/State & Country of Birth _____

Occupation _____ E-Mail Address _____

Marital Status: Single _____ Married: Catholic Marriage _____ or Civil Marriage _____ Widowed _____

Separated _____ Divorced _____ Annulled _____

Sacraments Received: Baptism _____ Communion _____ Confirmation _____

Spouse/Other Adult Living in Household

Last Name _____ First Name _____ Middle Name _____

Title: Mr. _____ Mrs. _____ Ms. _____ Miss _____ Dr. _____ **Suffix:** Sr. _____ Jr. _____ II _____ III _____ Other _____

Maiden Name (if applicable) _____ Prior Parish _____

Cell Phone _____ **Relationship to Head** _____

Religion _____ Date of Birth _____ City/State & Country of Birth _____

Occupation _____ E-Mail Address _____

Marital Status: -Single _____ -Married: Catholic Marriage _____ or Civil Marriage _____ -Widowed _____

-Separated _____ -Divorced _____

Sacraments Received: Baptism _____ Communion _____ Confirmation _____

I/We are interested in: Extraordinary Minister of Holy Communion _____ Lector _____ Usher _____

Minister of the Eucharist to the Homebound/Sick _____ Cantor _____ Choir _____

Parish School _____ Religious Education Program _____ RCIA Program _____

OVER--->

Child One

Last Name _____ First Name _____ Middle Name _____

Suffix: _____ Relationship to Head of Household: Child ___ Stepchild ___ Grandchild ___ Other _____

M ___ F ___ School Attending _____ Grade _____

Date of Birth _____ City/State of Birth _____ Religion _____

Sacraments Received: Baptism ___ Communion ___ Confirmation ___

Child Two

Last Name _____ First Name _____ Middle Name _____

Suffix: _____ Relationship to Head of Household: Child ___ Stepchild ___ Grandchild ___ Other _____

M ___ F ___ School Attending _____ Grade _____

Date of Birth _____ City/State of Birth _____ Religion _____

Sacraments Received: Baptism ___ Communion ___ Confirmation ___

Child Three

Last Name _____ First Name _____ Middle Name _____

Suffix: _____ Relationship to Head of Household: Child ___ Stepchild ___ Grandchild ___ Other _____

M ___ F ___ School Attending _____ Grade _____

Date of Birth _____ City/State/Country of Birth _____ Religion _____

Sacraments Received: Baptism ___ Communion ___ Confirmation ___

Child Four

Last Name _____ First Name _____ Middle Name _____

Suffix: _____ Relationship to Head of Household: Child ___ Stepchild ___ Grandchild ___ Other _____

M ___ F ___ School Attending _____ Grade _____

Date of Birth _____ City/State/Country of Birth _____ Religion _____

Sacraments Received: Baptism ___ Communion ___ Confirmation ___

Is there any information you would like your Pastor to know? _____

**Welcome to the Parish Family of
St. Martin de Porres**

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