

Church of St. Joachim – St. John the Evangelist

Parish Office -2 Oak Street

Beacon, NY 12508

845-838-0915

Parishioner Registration Form

Office Use Only
Received by: _____
Date Entered: _____
Envelope #: _____

Yellow Fields are required.

Would you like to receive envelopes? **Yes**_____ **No**_____

Family Name: _____ **Date:** _____

Your Name: _____ **Spouse:** _____

Address: _____
Street City Zip

Telephone: _____ **E-mail address:** _____

Religion: _____ **Spouse's Religion** _____

Children at home:

First Name	Sex M/F	Date of Birth MM-DD-YYYY	Baptism Date Rec'd	Communion Date Rec'd	Confirmation Date Rec'd

Special Skills available to the Parish: eg. Lectoring, Communion to the homebound, Catechist, computer entry, music, carpentry, electric, plumbing, painting, decorating, gardening, etc.

Iglesia de San Joaquín-San Juan Evangelista
Parroquia- 2 Oak Street
Beacon, NY 12508-1805
(845)838-0915

Hoja de inscripción _____ Sobre # _____

Apellido _____ Fecha _____

Su nombre _____ Nombre del esposo/a _____

Dirección _____

Teléfono _____

Correo electrónico _____

Religión _____ Religión del esposo/a _____

Ocupación _____

Ocupación del esposo/a _____

Soltero/a ____ Casado ____ Viudo/a ____ Divorciado/a ____

Niños en la casa:

Nombre	M/F	Fecha de nacimiento	Sacramentos (B Com Conf)
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