

# ST. AUGUSTINE'S: PARISHIONER INFORMATION FORM W

THE FAMILY NAME \_\_\_\_\_ DATE \_\_\_\_\_

<b>ENVELOPE NUMBER</b>	<b>YOUR NAME</b>	<b>YOUR SPOUSE'S NAME</b>
You're present envelope number.	FIRST:	FIRST:
I would like to have envelopes (check)	LAST:	LAST:
<b>HOME ADDRESS</b>	APT. NO.	
<b>MAILING ADDRESS</b> ( IF DIFFERENT FROM HOME )		
<b>CITY</b>	POSTAL CODE	
<b>HOME PHONE</b>	email:	
<b>RELIGION</b>		
<b>DATE OF BIRTH</b>	____ / ____ / ____ <small>MM DD YY</small>	____ / ____ / ____ <small>MM DD YY</small>
<b>OCCUPATION</b>		
<b>BUSINESS PHONE</b>	(     )	(     )
<b>LANGUAGE</b>		
<b>GENDER</b>	M   /   F	M   /   F
<b>BAPTIZED</b>	Y   /   N	Y   /   N
<b>CONFIRMED</b>	Y   /   N	Y   /   N
<b>MARITAL STATUS</b>		
<b>MARRIAGE DATE</b>		

<b>PARISH ORGANIZATIONS YOU <u>NOW</u> BELONG TO</b>	<b>YOURSELF</b>	<b>SPOUSE</b>
<b>PARISH MINISTRIES YOU <u>NOW</u> SERVE IN</b>		

**CHILDREN INFORMATION** (we recommend older children, working & living at home, fill out a separate registration)

<b>CHILD'S NAME</b>	<b>DATE BORN</b>	<b>BAPTIZED</b>	Yes	No
_____ <small>( ONLY THOSE LIVING AT HOME )</small>	____ / ____ / ____ <small>MM DD YY</small>	<b>FIRST COMM.</b>	Yes	No
	<b>GENDER</b> M / F	<b>CONFIRMED</b>	Yes	No
		<b>SCHOOL ATTENDING</b> _____		

**ST. AUGUSTINE'S: PARISHIONER INFORMATION FORM: W**  
**( Page Two )**

<p align="center"><b>CHILD'S NAME</b></p> <hr/> <p align="center">( ONLY THOSE LIVING AT HOME )</p>	<p align="center"><b>DATE BORN</b></p> <p align="center">____/____/____ MM                  DD                  YY</p> <p><b>GENDER</b>      M / F</p>	<p><b>BAPTIZED</b>      <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>FIRST COMM.</b>      <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>CONFIRMED</b>      <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>SCHOOL</b></p> <p><b>ATTENDING</b> _____</p>
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