

**ST. JOHN BOSCO PARISH
NEW PARISHIONER REGISTRATION FORM**

Office Use Only: Date Entered: _____ Env. # _____
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Family Name: _____

Address: _____

Telephone: _____ Email _____

Husband's Information (or Single Male)		Wife's Information (or Single Female)
1. Maiden Name & First Name		
2. Catholic (Y/N)?		
3. Occupation		
4. Place of Employment		
5. Date of Birth & Age		
6. Sacraments received (Check all that apply)	Baptism _____ First Communion _____ Confirmation _____ Marriage _____	Baptism _____ First Communion _____ Confirmation _____ Marriage _____
7. Involvement in previous parish? Please list		

Marital Status? _____
 Were you married in a Catholic Church? Yes _____ No _____ Place of Marriage _____

Name of Children in Residence	Date of Birth	Check Sacraments Rec'd			School / College	Grade
		Bap	Comm	Confirm		
1.						
2.						
3.						
4.						

Do you wish envelopes for your children? Yes _____ No _____

Names of others living with family (e.g. grandparents, aunts, uncles) :
 1. _____ Date of birth: _____ Religion: _____
 2. _____ Date of birth: _____ Religion: _____

Do they wish to register in the parish? Yes _____ No _____
 If homebound, do they wish to receive the sacraments on a monthly basis? Yes _____ No _____