

St. Patrick Parish: New Registration, or Information Update Form

Family Last Name		Preferred Salutation (eg. Mr. & Mrs.; Ms.; Miss; Dr. & Mrs.; John & Judy; etc.)	
Address		Apt. #	
City	Zip	Home Phone (landline or cell)	May we publish your 'home' number in our annual parish directory? <input type="checkbox"/> Yes <input type="checkbox"/> No

Head of Household Spouse

Name		Middle Initial	Name	
Date of Birth	Religion (if not Catholic)		Date of Birth	Religion (if not Catholic)
Occupation: (if student, list institution & anticipated graduation date)			Occupation: (if student, list institution & anticipated graduation date)	
Employer	Work Phone (never published)		Employer	Work Phone (never published)
Email	Cell Phone (never published)		Email	Cell Phone (never published)
Sacramental History Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No First Eucharist? <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No			Sacramental History Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No First Eucharist? <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If married, is this your... <input type="checkbox"/> First Marriage <input type="checkbox"/> Second Marriage		Were you married by a priest? <input type="checkbox"/> Yes <input type="checkbox"/> No	If married, is this your... <input type="checkbox"/> First Marriage <input type="checkbox"/> Second Marriage	
Church or place of Marriage		City & State of Marriage		Wedding date

Minor(s) living at home {adult children who reside with you must register separately}

Child's Name (including last, if different from above)	Date of Birth	Gender	Baptized?	1st Comm?	Confirmed?	Religious Ed?*	Present School
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	

* Religious Ed. = Please indicate the means by which your child's Religious Education is supplemented by the Church ✦ PSR = Parish School of Religion {aka: CCD} ✦ Xolic = Catholic School

May we identify you, in the bulletin, as a new parishioner? <input type="checkbox"/> Yes <input type="checkbox"/> No	Does anyone living at this address require Sacramental services at home? <input type="checkbox"/> Yes <input type="checkbox"/> No	Office: <input type="text"/>	Env #: <input type="text"/>	Rolodex: <input type="text"/>	EIC: <input type="text"/>
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If you live alone, please list a "next of kin" and their contact number on the reverse side of this form

If you are new to St. Patrick Parish, please call 440.987.9873 to schedule a "meet-and-greet" appointment with our pastor, Fr. David Trask.

When completed, print & return to the parish office (or via the collection basket). OR, save & email to secretary@StPatrickWellington.com