

**Welcome to the Roman Catholic Community of
St. Joseph and St. Catherine of Siena**

Registration Form

Date: _____

Family Name: _____

Address: _____

Phone #: _____ Unlisted: Yes ___ No ___

E-mail address: _____

Are you interested in having Church Envelopes for your Weekly Offerings? Yes ___ No ___
(If you give cash, envelopes are the only way to keep records for tax purposes.)

Are there any special needs or circumstances within your family that the Church
could be helpful with?

Which Church do you territorially live in or regularly attend?

St. Joseph ___ St. Catherine of Siena ___

Which Mass time do you regularly attend:

Family Information

Family Member #1:

First Name:

Middle Initial:

Maiden Name (If applicable):

Male ___ Female ___

Birth Date:

Marital Status: Single ___ Married ___ Separated ___ Divorced ___ Widowed ___

If married, were you married within the Roman Catholic Church?

Date of Marriage:

Occupation:

Work Phone:

Grade In School:

School Attending:

Religion: _____ If Protestant, which Denomination:

Baptism: Yes ___ No ___

First Communion: Yes ___ No ___

First Confession: Yes ___ No ___

Confirmation: Yes ___ No ___

Have you served in the Church (Teaching, Liturgical Ministries, etc.) Yes ___ No ___

Do you wish to continue to serve? Yes ___ No ___ If yes, please explain:

Family Member # _____

First Name:

Middle Initial:

Maiden Name (if applicable):

Male ___ Female . ___

Birth Date:

Occupation:

Work Phone:

Grade In School:

School Attending:

Religion:

If Protestant, which Denomination:

Baptism: Yes ___ No ___

First Confession Yes ___ No ___

First Communion Yes ___ No ___

Confirmation Yes ___ No ___

Have you served in the Church (Teaching, Liturgical Ministries, etc.) Yes ___ No ___

Do you wish to continue to serve? Yes ___ No ___ If yes, please explain:

Family Member # _____

First Name:

Middle Initial:

Maiden Name (If applicable):

Male ___ Female . ___

Birth Date:

Occupation:

Work Phone:

Grade In School:

School Attending:

Religion:

If Protestant, which Denomination:

Baptism Yes ___ No ___

First Confession Yes ___ No ___

First Communion Yes ___ No ___

Confirmation Yes ___ No ___

Have you served in the Church (Teaching, Liturgical Ministries, etc.) Yes ___ No ___

Do you wish to continue to serve? Yes ___ No ___ If yes, please explain: