

St. John Bosco Catholic Church - New Parishioner Registration Form

Family ID/ENV # _____ Ethnicity _____ Today's Date ____ / ____ / ____

Family Name: _____ M/M _____ Mr _____ Mrs _____ Ms _____ Dr _____

Street Address _____ Apt # _____ City _____ State _____ Zip Code _____

Home Ph _____ Work Ph (Head) _____ Work Ph (Spouse) _____

Cell (Head) _____ Cell (Spouse) _____ Email _____

Head: First _____ Middle _____ Last _____ Maiden Name _____

Religion _____ DOB ____ / ____ / ____ Occupation _____ Location _____

Baptism Y/N _____ Date ____ / ____ / ____ Church/Location _____ Unknown _____

Communion Y/N _____ Year _____ Church/Location _____ Unknown _____

Penance Y/N _____ Year _____ Church/Location _____ Unknown _____

Confirmation Y/N _____ Year _____ Church/Location _____ Unknown _____

Spouse: First _____ Middle _____ Last _____ Maiden Name _____

Religion _____ DOB ____ / ____ / ____ Occupation _____ Location _____

Baptism Y/N _____ Date ____ / ____ / ____ Church/Location _____ Unknown _____

Communion Y/N _____ Year _____ Church/Location _____ Unknown _____

Penance Y/N _____ Year _____ Church/Location _____ Unknown _____

Confirmation Y/N _____ Year _____ Church/Location _____ Unknown _____

Marital Status: Single _____ Widowed _____ Divorced _____ Married By Priest _____ Out of Church _____ Separated _____

Marriage Valid by Church Law _____ Original Marriage Date ____ / ____ / ____ Church/Location _____

Status of Previous Marriage (if any): Divorced _____ Married out of Church _____ Married by Priest _____ Annulled _____

Children:

1) First: _____ Middle _____ Last Name: _____ DOB: ____ / ____ / ____

Male/Female: _____ Student: Y/N _____ Grade: _____ Location: _____ Religion: _____

Baptized: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Communion: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Confirmation: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Penance: Y/N _____ Month/Year ____ / ____ Church/Location: _____

2) First: _____ Middle _____ Last Name: _____ DOB: ____ / ____ / ____

Male/Female: _____ Student: Y/N _____ Grade: _____ Location: _____ Religion: _____

Baptized: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Communion: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Confirmation: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Penance: Y/N _____ Month/Year ____ / ____ Church/Location: _____

3) First: _____ Middle _____ Last Name: _____ DOB: ____ / ____ / ____

Male/Female: _____ Student: Y/N _____ Grade: _____ Location: _____ Religion: _____

Baptized: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Communion: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Confirmation: Y/N _____ Month/Year ____ / ____ Church/Location: _____

Penance: Y/N _____ Month/Year ____ / ____ Church/Location: _____