

# St. Mark the Evangelist Catholic Church

## Parishioner Registration Form



Family Last Name

Today's Date

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### Family Information

Street Address	Apt #	City	State	Zip
Primary Phone (    ) <input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	Primary Email		Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Engaged <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	Roman Catholic Marriage? <input type="checkbox"/> Yes <input type="checkbox"/> No Marriage Date    Maiden Name
Secondary Phone (    ) <input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	Secondary Email			

### Head of Household (HoH) & Spouse

First Name	Last Name (if different)	Date of Birth	Gender	Relationship to HoH	Religion	Sacraments	Occupation
						<input type="checkbox"/> Baptism <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation	
						<input type="checkbox"/> Baptism <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation	

### Minor Children (under 18 years)

First Name	Last Name (if different)	Date of Birth	Gender	Relationship to HoH	Religion	Sacraments	Grade	School
						<input type="checkbox"/> Baptism <input type="checkbox"/> 1st Communion <input type="checkbox"/> Confirmation		
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