

**WELCOME TO ST. FRANCES CABRINI CHURCH!**

OFFICE:  
 Env # \_\_\_\_\_  
 Online \_\_\_\_\_

So that we may serve you better, please complete this detailed registration form and return it to the parish office. If you wish, you may give it to an usher at Mass, or drop it in the collection basket. *Thank you!*



(PLEASE PRINT)

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ SPOUSE \_\_\_\_\_  
 (Circle Preference): Mr./Mrs. Mr. Mrs. Ms. Miss Dr./Mrs. Mr./Dr.

P. O. Box: \_\_\_\_\_ Street Address: \_\_\_\_\_ Apt # \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Phone( ) \_\_\_\_\_ ( ) \_\_\_\_\_ e-mail: \_\_\_\_\_

Date Registered: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Family Status (circle one): Church Marriage Married Single Divorced Separated Widowed

**MEMBER INFORMATION**

	HEAD	SPOUSE	Child at Home	Child at Home	Child at Home	Child at Home	Child at Home
FIRST NAME							
LAST NAME (if different)							
RELIGION							
LANGUAGES SPOKEN							
OCCUPATION							
GENDER	M _ F _	M _ F _	M _ F _	M _ F _	M _ F _	M _ F _	M _ F _
BIRTH DATE	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____
<u>BAPTISM</u>	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __
<u>1st COMMUNION</u>	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __
<u>CONFIRMATION</u>	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __
<u>MARRIAGE</u> (DATE of MARRIAGE)	Y __ N __ ( _____ )	Y __ N __ ( _____ )	Y __ N __	Y __ N __	Y __ N __	Y __ N __	Y __ N __