

SAINT JOSEPHINE BAKHITA PARISH REGISTRATION

Toda

Family LAST Name _____ Address: _____
 Home Phone # _____ Work Phone # _____ Cell Phone # _____
 Town _____ Zip _____ Email _____

FAMILY MEMBERS First Names (Please include maiden name & last name if different from above)	Date of Birth MM/DD/YY	RELIGION Catholic = C (other specify)	SACRAMENTS Please ✓ Sacraments received			
			Baptism	First Comm.	Confirm	Marria

I understand that by registering as a member of **Saint Josephine Bakhita Parish**, I am promising to support the church with my gifts of time, talent and treasure.

Office use only: Registration Date: _____ Inactivated Date: _____ Envelope # _____ Other: _____

My Date _____

Age	Occupation Skills/ Interests in Ministries

community by sharing my

:	_____
