

St. Boniface Catholic Church New Parishioner Registration Form Or

Updated Parishioner Information Form

FAMILY NAME	_ TODAY'S DATE				
ADDRESS	HOME PHONE				
CITY	ZIPCELL PHONE				
EMAIL ADDRESS	_ MAY WE TEXT YOU?YESNO				
Previous Parish	City/State				
Head(s) of Household	Baltician Baptism Occupation/ Business				

First Name	(Nickname)	Last Name	Sex (M/F)	Date of Birth	Religion	Baptism Year	Occupation/ Place of Employment	Business Phone
Marital Statu	s: Married	Single	W	idow	Divorced	Engaged		
Catholic Mar	riage? <u>Y</u> es	_No Date	of Marr	iage:]	Maiden Nar	ne	

Adult Children (Living away from home)

First Name	Last	Sex (M/F)	Date of Birth
Name			

OFFICE USE ONLY				
Envelope #				
EX	ACSA/CT			
PC	WP			
OSV	BUL			

Children Living at Home

First Name	(Nickname)	Last Name	Sex (M/F)	Date of Birth	Religion	Baptism Year	School	Grade

What led you to St. Boniface?

Do you have any questions about the parish?

Would you prefer to make your contribution through envelopes ______ or electronic giving _____?

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