



**St. Joseph Parish**  
Parish Registration Form

Home Info			
<i>Family last name:</i>		<input type="checkbox"/> exclude <b>family</b> from the parish directory	
<i>Address</i>	<i>Street:</i>		
	<i>City, State, Zip:</i>		
		<input type="checkbox"/> exclude <b>address</b> from the parish directory	
<i>Home phone:</i>		<input type="checkbox"/> unlisted	
Head of Household		Spouse	
<i>First name/middle initial:</i>		<i>First name/middle initial:</i>	
<i>Prefer to be called:</i>		<i>Prefer to be called:</i>	
<i>Maiden name if applicable:</i>		<i>Maiden name if applicable:</i>	
<i>Cell phone:</i>		<i>Cell phone:</i>	
	<input type="checkbox"/> Exclude cell from directory		<input type="checkbox"/> Exclude cell from directory
<i>Business phone:</i>		<i>Business phone:</i>	
<i>Email:</i>		<i>Email:</i>	
<input type="checkbox"/> Exclude email from directory		<input type="checkbox"/> Exclude email from directory	
<i>Occupation:</i>		<i>Occupation:</i>	
<i>Employer:</i>		<i>Employer:</i>	
<i>Religion:</i>		<i>Religion:</i>	
<i>Date of birth:</i>		<i>Date of birth:</i>	
<i>Baptized?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Baptized?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Confirmed?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Confirmed?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Marital status:</i>	<input type="checkbox"/> Single <input type="checkbox"/> Married (by Priest) <input type="checkbox"/> Married (not by Priest) <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	<i>Marital status:</i>	<input type="checkbox"/> Single <input type="checkbox"/> Married (by Priest) <input type="checkbox"/> Married (not by Priest) <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
<i>If married, wedding date:</i>			
Would you like a subscription to the St. Louis Review at \$35/year?			
<input type="checkbox"/> Yes <input type="checkbox"/> No		<i>Payment method:</i>	<input type="checkbox"/> Check <input type="checkbox"/> Cash
Children under age 23 living at home			
<b>#1 Full Name:</b>		<b>#2 Full Name:</b>	
<i>Date of birth:</i>		<i>Date of birth:</i>	
<i>Religion:</i>		<i>Religion:</i>	
<i>Baptized?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Baptized?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Confirmed?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Confirmed?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>School attending/grade:</i>		<i>School attending/grade:</i>	
<b>#3 Full Name:</b>		<b>#4 Full Name:</b>	
<i>Date of birth:</i>		<i>Date of birth:</i>	
<i>Religion:</i>		<i>Religion:</i>	
<i>Baptized?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Baptized?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Confirmed?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Confirmed?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>School attending/grade:</i>		<i>School attending/grade:</i>	