



St. John Fisher Parish Registration Form

<i>Office Use Only</i>	
Employee Initials: _____	Date Entered: _____
Assigned Env. No.: _____	Guild No.: _____
<input type="checkbox"/> Donor Acct. Type Set	

Welcome to St. John Fisher! We are pleased to have you as part of our faith community and hope that you will find many blessings here. Please fill-out all the information on both sides of this form and return it to the parish office. Thank you!

LAST NAME: _____

PHONE: _____

E-MAIL: _____

HOME ADDRESS: _____

CITY: _____

ZIP: _____

MAILING ADDRESS (IF DIFFERENT FROM ABOVE): _____

EMERGENCY CONTACT NAME: _____ **PHONE:** _____

(Please list a person not living in your household to be contacted in case of an emergency.)

Welcome! As part of our parish community we work together to support our parish. It is your generosity that helps your parish thrive!

“...if it is serving, then serve; if it is teaching, then teach; if it is to encourage, then give encouragement; if it is giving, then give generously; if it is to lead, do it diligently; if it is to show mercy, do it cheerfully.” Romans 12:7-8

I WOULD LIKE TO SUPPORT MY PARISH USING OFFERTORY COUPONS/ENVELOPES

I WOULD LIKE TO SUPPORT MY PARISH USING ELECTRONIC GIVING www.faithdirect.net Church Code # CA436)

HOW CAN WE SERVE YOU? WOULD YOU LIKE TO RECEIVE A PHONE CALL REGARDING ANY FAITH FORMATION, VOLUNTEER OPPORTUNITIES, PARISH SCHOOL, OR ANY OTHER INTEREST OR NEEDS? YES NO

PLEASE SPECIFY BELOW, WHAT TYPE OF INFORMATION YOU WOULD LIKE TO RECEIVE :

(Please fill out information on other side ➔)

	↓ HEAD OF HOUSEHOLD	↓ SPOUSE	↓ CHILD	↓ CHILD	↓ CHILD	↓ CHILD
TITLE (MR., MRS. DR., ETC)						
FIRST NAME						
MIDDLE NAME						
LAST NAME						
NICKNAME OR MAIDEN NAME						
GENDER (M/F)						
DATE OF BIRTH						
OCCUPATION			N/A	N/A	N/A	N/A
WORK PHONE #			N/A	N/A	N/A	N/A
CELL PHONE #			N/A	N/A	N/A	N/A
E-MAIL			N/A	N/A	N/A	N/A
RELIGION						
BAPTIZED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
DATE & PLACE						
1ST COMMUNION?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
DATE & PLACE						
CONFIRMATION?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
DATE & PLACE						
MARRIED?	<input type="checkbox"/> YES <input type="checkbox"/> NO		BY PRIEST?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
DATE & PLACE						