ST. ANN | ST. JOSEPH | ST. MARY

CATHOLIC CHURCH OF Jennings County

REGISTRATION FORM

ST. ANN'S PARISH _____ ST. JOSEPH'S PARISH _____ ST. MARY'S PARISH _____

(*Please check the parish above in which you want to be registered.*)

FAMILY (LAST) NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

EMAIL ADDRESS: _____ Do you want the Criterion mailed to you? YES NO

CURRENT MARITAL STATUS: MARRIED IN CATHOLIC CHURCH MARRIED IN OTHER CHURCH CIVIL MARRIAGE

SINGLE DIVORCED SEPARATED WIDOW

If married, Date of Wedding _____ Church of Wedding _____ City of Wedding _____

Please sign here _____ to acknowledge your approval for CCJC to use photographs of the below listed members in parish publications and on the parish website.

	Adult	Adult	Child	Child	Child	Child
			Please only indicate information for children living AT HOME with you.			
First Name						
Last Name (maiden name)						
Middle Name						
Title (Dr. Mrs. Miss)						
Name goes by						
Birthdate						
Marital Status						
Gender						
Occupation/Grade if student						
Religion						

SACRAMENETAL INFORMATION *Please fill in your CHURCH and CITY OF BAPTISM. If you have a copy of the baptismal certicate, we'd love to have one! Please check all sacraments that have been received.*

Baptism Church						
Baptism City						
Communion						
Confirmation						

Please return your registration form to the parish office at 629 Clay Street, North Vernon, IN, 47265.

FOR OFFICE USE: DATE REGISTERED _____ MEMBER NUMBER _____