



The Catholic Community of St. Catherine of Siena
Pittstown, NJ

PARISH REGISTRATION FORM

Family Name			
Title	Mr. & Mrs. / Mr. / Mrs. / Ms. / Miss. / Dr. / Dr. & Mrs. / Mr. & Dr. / Other		
Residence Address		City	State Zip
Mailing Address (if different)			
Municipality			
Home Phone	()		Listed / Unlisted
Work Phone	()		Listed / Unlisted
Cell Phone	()		Listed / Unlisted
Legal Status	Single / Married* / Separated / Divorced / Widowed	*If married: Was your marriage in a Catholic Church - Yes / No	
Previous Parish & City			
E-Mail Address	#1	#2	

	Adult	Adult	Child	Child	Child	Child or Other
First Name						
Last if different						
Maiden Name						
Religion						
Gender (Circle One)	Male / Female	Male / Female	Male / Female	Male / Female	Male / Female	Male / Female
Date of Birth						
Baptism If Yes, When	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Communion If Yes, When	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Confirmation If Yes, When	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Occupation						
Mass Attendance (Circle One)	Weekly	Occasionally	Seldom			

Veteran Status (Circle One)	Active	Inactive	Other (explain)
--------------------------------	--------	----------	-----------------

Official Use Only (Initial Each)	Pastor:	Finance:	Welcome:
--	---------	----------	----------