



PARISH REGISTRATION FORM
Welcome to the Saint Aloysius Parish

PERSONAL INFORMATION (This information is private)

ADULT #1 (Head of Household)

Name (first, middle initial, last): _____

Maiden (if applicable): _____

Street Address: _____

Apt. #: _____ P.O. Box #: _____ City: _____ ZIP CODE: _____

E: Mail: _____ Phone: (Home) _____ (Cell) _____

Marital Status: Single/Married/Divorced/Widowed (To whom): _____

Date of Birth: ____/____/____ Place of Birth: _____

Ethnic Background: _____ Religion: _____

Check the Sacraments Received: Baptism ____ Communion ____ Confirmation ____

Occupation: _____ Work Phone: _____

Alum of St. Aloysius Grade School (Year _____)

Areas of Interest, Skills & Talents: _____

Are you interested in ACH (Electronic Debt Authorization) for automatic deductions for your parish contributions? Y ____ N ____

ADULT #2 (living at same address)

Name (first, middle initial, last): _____

Maiden (if applicable): _____

E: Mail: _____ Phone: (Home) _____ (Cell) _____

Marital Status: Single/Married/Divorced/Widowed (To whom) : _____)

Date of Birth: ____/____/____ Place of Birth: _____

Ethnic Background: _____ Religion: _____

Check the Sacraments Received: Baptism__ Communion____ Confirmation____

Occupation: _____ Work Phone: _____.

Alum of St. Aloysius Grade School (Year ____)

Areas of Interest, Skills & Talents: _____

Children (living at same address)

Name: _____

Birthday: _____ Baptism: _____ Location

: _____

Confirmation: _____ Location: _____

Name: _____

Birthday: _____ Baptism: _____ Location: _____

Confirmation: _____ Location: _____

Name: _____

Birthday: _____ Baptism: _____ Location: _____

Confirmation: _____ Location: _____

Name: _____

Birthday: _____ Baptism: _____ Location: _____

Confirmation: _____ Location: _____