

# St. Anthony Claret Church - Member Registration Form

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Family's Last Name

\_\_\_\_\_  
Address                                      Apt. #                                      City                                      State                                      Zip Code

(    ) \_\_\_\_\_ Would you like to receive Church Offering Envelopes by mail? Yes \_\_\_ No \_\_\_  
Telephone Number                                      Would you like to do Electronic Giving? Yes \_\_\_ No \_\_\_

Email Address: \_\_\_\_\_

Marital Status: \_\_\_ Single \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Widow

Were you married by a priest in the Roman Catholic Church: \_\_\_ Yes \_\_\_ No    Religion: Catholic \_\_\_ Other \_\_\_

(    ) \_\_\_\_\_ (    ) \_\_\_\_\_  
Husband's Business Phone #                                      Wife's Business Phone #

Adult Names: - First, Middle Initial, Last:	Birthdate Month/Day/Year	Work Occupation:
1.		
2.		
Names of the Children - First, Middle Initial, Last:	Birthdate: Month/Day/Year	School Grade:
1.		
2.		
3.		
4.		
5.		
Please list other people that are living with you: First, Middle Initial, Last:	Birthdate Month/Day/Year	Relationship:
1.		
2.		
3.		
4.		
5.		

Please fill out this form completely and return it to the Rectory Office.