

Envelopes	Diocese Card	PDS	Rolodex	Father Reports	DRE	Bulletin

ST. PETER REGISTRATION FORM

DATE _____

ENVELOPE_(office use) _____

LAST NAME (Head of Household) _____

MAILING ADDRESS _____

STREET ADDRESS (if different) _____

HOME PHONE(S) _____ LISTED ___ UNLISTED ___

Publish in lists & release to members? YES ___ NO ___

Email Address _____

HEAD OF HOUSEHOLD: DR. **MR.** MRS. MISS MS. OTHER _____

FULL FIRST NAME _____ M.I. _____ SUFFIX (Sr/Jr/etc.) _____

NICKNAME _____ DATE OF BIRTH _____ M. _____ F. _____

SINGLE ___ MARRIED ___ WIDOWED ___ DIVORCED ___ SEPARATED ___

OCCUPATION _____ EMPLOYER _____

RELIGION _____ **(Catholics: Please fill out a, b & c)**

a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)

FIRST COMMUNION _____ CONFIRMATION _____

b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

c. Current Parish Ministries and/or Activities during the past year:

SPOUSE: TITLE (circle one) DR. **MR.** MRS. MISS MS. OTHER _____

FULL FIRST NAME _____ M.I. _____ MAIDEN NAME _____

LAST NAME (if different) _____ DATE OF BIRTH _____

OCCUPATION _____ EMPLOYER _____

RELIGION _____ **(Catholics: Please fill out a, b & c)**

a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)

FIRST COMMUNION _____ CONFIRMATION _____

MARRIAGE _____ (DATE) _____ (PARISH)

b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

c. Current Parish Ministries and/or Activities during the past year:

OVER

CHILDREN (Include ONLY those living at home or temporarily away at college)

#1: TITLE (circle one) DR. MR. MRS. MISS MS. OTHER _____
FULL FIRST NAME _____ M.I. _____
LAST NAME (if different) _____
NICKNAME _____ SUFFIX (Sr/Jr/etc.) _____
DATE OF BIRTH _____ M ___ F ___ City/State of Birth _____
a. GRADE _____ SCHOOL _____
b. OCCUPATION _____ EMPLOYER _____
RELIGION _____ (Catholics: Please fill out a, b & c)
a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)
FIRST COMMUNION _____ CONFIRMATION _____
b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

#2: TITLE (circle one) DR. MR. MRS. MISS MS. OTHER _____
FULL FIRST NAME _____ M.I. _____
LAST NAME (if different) _____
NICKNAME _____ SUFFIX (Sr/Jr/etc.) _____
DATE OF BIRTH _____ M ___ F ___ City/State of Birth _____
a. GRADE _____ SCHOOL _____
b. OCCUPATION _____ EMPLOYER _____
RELIGION _____ (Catholics: Please fill out a, b & c)
a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)
FIRST COMMUNION _____ CONFIRMATION _____
b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

#3: TITLE (circle one) DR. MR. MRS. MISS MS. OTHER _____
FULL FIRST NAME _____ M.I. _____
LAST NAME (if different) _____
NICKNAME _____ SUFFIX (Sr/Jr/etc.) _____
DATE OF BIRTH _____ M ___ F ___ City/State of Birth _____
a. GRADE _____ SCHOOL _____
b. OCCUPATION _____ EMPLOYER _____
RELIGION _____ (Catholics: Please fill out a, b & c)
a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)
FIRST COMMUNION _____ CONFIRMATION _____
b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

#4: TITLE (circle one) DR. MR. MRS. MISS MS. OTHER_____

FULL FIRST NAME _____ M.I. _____

LAST NAME (if different) _____

NICKNAME _____ SUFFIX (Sr/Jr/etc.) _____

DATE OF BIRTH _____ M ___ F ___ City/State of Birth _____

a. GRADE _____ SCHOOL _____

b. OCCUPATION _____ EMPLOYER _____

RELIGION _____ **(Catholics: Please fill out a, b & c)**

a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)
FIRST COMMUNION _____ CONFIRMATION _____

b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

#5: TITLE (circle one) DR. MR. MRS. MISS MS. OTHER_____

FULL FIRST NAME _____ M.I. _____

LAST NAME (if different) _____

NICKNAME _____ SUFFIX (Sr/Jr/etc.) _____

DATE OF BIRTH _____ M ___ F ___ City/State of Birth _____

a. GRADE _____ SCHOOL _____

b. OCCUPATION _____ EMPLOYER _____

RELIGION _____ **(Catholics: Please fill out a, b & c)**

a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)
FIRST COMMUNION _____ CONFIRMATION _____

b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

#6: TITLE (circle one) DR. MR. MRS. MISS MS. OTHER_____

FULL FIRST NAME _____ M.I. _____

LAST NAME (if different) _____

NICKNAME _____ SUFFIX (Sr/Jr/etc.) _____

DATE OF BIRTH _____ M ___ F ___ City/State of Birth _____

a. GRADE _____ SCHOOL _____

b. OCCUPATION _____ EMPLOYER _____

RELIGION _____ **(Catholics: Please fill out a, b & c)**

a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)
FIRST COMMUNION _____ CONFIRMATION _____

b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

OVER (Marriage Info & Other People in Household)

MARRIAGE INFORMATION (IF CURRENTLY MARRIED)

1. DATE, CITY & STATE (OR COUNTRY) OF MARRIAGE:

2. PERFORMED BY:

a. CATHOLIC PRIEST _____ Name of Church _____

b. MINISTER/RABBI _____ Was Catholic Dispensation granted? YES ___ NO ___

c. JUSTICE OF THE PEACE _____ d. OTHER _____

3. IF NOT MARRIED BY CATHOLIC PRIEST OR WITH CHURCH DISPENSATION:

Was marriage validated (blessed) by the Church? YES ___ NO ___

4. FOR CONVERTS: Was marriage performed before joining Church? YES ___ NO ___

5. IF MARRIAGE IS NOT VALID IN CATHOLIC CHURCH:

a. Was either married before? Husband: YES ___ NO ___ Wife: YES ___ NO ___

IF NO TO 5a FOR BOTH SPOUSES:

b. Have you explored validation process? YES ___ NO ___

IF NO TO 5b: c. Do you wish to explore it? YES ___ NO ___

IF YES TO 5a FOR EITHER OR BOTH SPOUSES:

d. Have you attempted Annulment Process? YES ___ NO ___

IF NO TO 5d: e. Do you wish to attempt it? YES ___ NO ___

IF YES TO 5d: f. Have you completed it? YES ___ NO ___

IF YES TO 5f: g. Was it approved? YES ___ NO ___

IF YES TO 5g: h. Is validation date set? YES ___ NO ___

OTHER ADULT(S) IN HOUSEHOLD (DO NOT INCLUDE adult children still at home)

RELATIONSHIP _____

TITLE (circle one) DR. MR. MRS. MISS MS. OTHER _____

FULL FIRST NAME _____ MIDDLE INITIAL _____

LAST NAME (if different) _____

NICKNAME _____ SUFFIX (Sr/Jr/etc.) _____

DATE OF BIRTH _____ MALE ___ FEMALE ___

OCCUPATION _____ EMPLOYER _____

RELIGION _____ (Catholics: Please fill out a, b & c)

a. Sacraments: BAPTISM _____ (DATE) _____ (PARISH)

FIRST COMMUNION _____ CONFIRMATION _____

b. Mass Attendance: REG. ___ FREQ. ___ OCC. ___ SELDOM ___ NEVER ___

c. Current Parish Ministries and/or Activities during the past year:

