



## PARISH REGISTRATION FORM

Family Name: .....

Address: .....

City: ..... State: ..... Zip: ..... Phone: (.....).....

Marital Status: *(please circle one)* single / married / divorced / widowed / (other .....

IF APPLICABLE:

Date of Marriage: ..... Church / City/ State.....

If married- are you sacramentally married in the Catholic Church? *(by a Priest / Deacon)* Yes..... No.....

Maiden Name: .....

Are you seasonal Resident: Yes .....No ..... If yes, what months do you reside in Florida?.....-.....

*To support the mission and operating expenses of SKD Parish Community, ALL registered parishioners will receive an envelope number. Envelope or on-line giving record will allow SKD Parish Office to issue a document required for your income- tax purposes as well as a proof of attendance, which is mandatory to become a Godparent (sponsor) for baptisms/ confirmations.*

**Do you want to receive paper envelopes?**                      Yes .....      No .....

**Do you want to be enrolled in on-line giving?**                      Yes .....      No .....

<b>Head of the Household: Mr. Mrs. Ms. Dr.</b>	<b>Spouse: Mr. Mrs. Ms. Dr.</b>
Full Name: .....	Full Name: .....
Date of Birth:.....M ..... F.....	Date of Birth: ..... M..... F.....
Religion:.....	Religion: .....
<b>Sacraments received:</b> Baptism: Yes..... No..... First Communion: Yes..... No..... Confirmation: Yes..... No.....	<b>Sacraments received:</b> Baptism: Yes..... No..... First Communion: Yes..... No..... Confirmation: Yes..... No.....
Cell phone #: .....	Cell phone #:.....
Email:.....	Email:.....

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**DEPENDENTS (if applicable):**

Child's name:.....	Child's name:.....
Date of birth: .....M.....F.....	Date of birth: .....M.....F.....
Place of baptism: .....	Place of baptism: .....
First communion: Yes.....No.....	First communion: Yes.....No.....
Confirmation: Yes..... No.....	Confirmation: Yes..... No.....
Current grade: .....	Current grade: .....
School: .....	School: .....
Enrolled in Faith Formation: Yes..... No.....	Enrolled in Faith Formation: Yes..... No.....

Child's name:.....	Child's name:.....
Date of birth: .....M.....F.....	Date of birth: .....M.....F.....
Place of baptism: .....	Place of baptism: .....
First communion: Yes.....No.....	First communion: Yes.....No.....
Confirmation: Yes..... No.....	Confirmation: Yes..... No.....
Current grade: .....	Current grade: .....
School: .....	School: .....
Enrolled in Faith Formation: Yes..... No.....	Enrolled in Faith Formation: Yes..... No.....

Office Use Only: Envelope # _____ Date Entered _____
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