



## PARISH REGISTRATION FORM

Family Last Name: ..... Address.....  
 City: ..... State: ..... Zip: ..... Phone: (.....)  
 Marital Status: *(please circle one)* single / married / divorced / widowed / (other .....

IF APPLICABLE:

Date of Marriage: ..... Maiden Name: .....  
 Church's name / City.....State.....  
 If married- are you sacramentally married in the Catholic Church? *(by a Priest / Deacon)* Yes..... No.....  
 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 Family, ALL registered parishioners will receive an envelope number. Envelope or on-line giving records will allow SKD Parish Office to issue a document required for your income-tax purposes as well as a proof of attendance, which is required to become a Godparent (sponsor) for baptisms/ confirmations.**

**Please select one:**

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

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

**PLEASE COMPLETE BELOW FOR ALL FAMILY MEMBERS:**

Head of the Household: Mr. Mrs. Ms. Dr.	Spouse: Mr. Mrs. Ms. Dr.
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:.....

**Please continue to page 2**

**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 _____