St. Mark's R.C. Church
Parish Registration Form

Select your preference:
Envelopes: ___ *or* Online Giving: ___
Note: To register for online giving visit the parish website stmarkshorham.org

Family Last Name _____

Street Address _____ Apt. # _____

Town and Zip _____

Mailing Address _____
(if different from above)

Maiden Name _____
Phone (home) _____
Phone (cell - wife) _____
Phone (cell - husband) _____
E-mail (wife) _____
E-mail (husband) _____

First Name/MI **Indicate Title: Mr., Mrs., Ms., Miss**	Single (S) Married (M) Widowed (W) Separated (S) Divorced (D)	**If married,** - **Church** indicate church & date - **Civil** indicate date	Gender M F	Date of Birth (MM/DD/YY	Catholic (Y/N) If No, indicate religion	Baptized Y/N	1st Comm Y/N	Confirmed Y/N	Mass Attendance Weekly (W) Monthly (M) Seldom (S)	Language at home Englis, Spanish, Portuguese, Other (please specify)	Special Needs (e.g., homebound, no car)

Children/ Other Adults Living at this Address:	Gender M/F	Relationship Son/Daughter Parent, Other (please specify)	Date of Birth (MM/DD/YY	Birth (B) Adopted (A) Foster (F)	Baptized Y/N	1st Comm Y/N	Confirmed Y/N	Special Needs (e.g., homebound)
First Name - Last Name								

Husband's Occupation _____ Place of Employment _____

Wife's Occupation _____ Place of Employment _____

If retired, Former Occupation(s) _____ Place of Employment _____

Skills, Talents (e.g., graphic artist, electrician, financial): _____

OFFICE USE ONLY: Faith Formation: (Y/N) ___ WELCOME LETTER (Y/N): __ DATE MAILED: ____ ENV #: _____ STAFF INITIALS: _____