

ST. FRANCIS CHURCH 114 MOUNT VERNON STREET RIDGEFIELD PARK N.J. 07660 201-641-6464 FAX: 201-641-2282

REGISTRATION FORM

	DATE:					
NEW PARISHIONER ENVELOPE NUM	MBER: (Office Information)					
NEW PARISHIONER	ADDRESS CHANGE					
INFORMATION CHANGE	LAST NAME CHANGE	_				
Mr. & MrsMrs.	Mr. Ms. The Family of					
LAST NAME:	MAIF					
FEMALE	MALE					
FIRST NAMES		_				
MAIDEN NAME						
BIRTHDATE (Mo/Day/Year)						
OCCUPATION	raign and a second of the second					
ADDRESS (Include Apt. #):	APT#					
CITY:	State:ZIP:					
PHONE #:	CELL #:					
PRIMARY EMAIL ADDRESS	(one only	y)				
SACRAMENTS RECEIVED (Please	Circle)					
FEMALE	MALE					
Baptism YES / NO	YES / NO					
1st Communion YES / NO	YES / NO					
Confirmation YES / NO	YES / NO					
SUNDAY ENVELOPES: Will Use Envelop	pes Will Not Use Envelopes					
	www.stfrancisrp.org and click on the e-contributions button. er online using either your checking account or credit card.					

CITY/STATE

PREVIOUS PARISH:

COMPLETE THE FOLLOWING FOR YOUR CHILDREN LIVING AT HOME:

Name	Birthday (Mo/Day/Year)	Baptism (Yes or I		1st Com. (Yes or No		Confirmed (Yes or No	
1	1 17	3 . 3 . 2	0.656				
2	7.74						
3	1931.00				7/3/41		
4			1				
5							AMARINE SAN
PLEASE CHECI	K All APPROPRI	LUNTE ATE ACT	FIVITIE	S IN WH	ICH YOU	WOUL	D LIKE
LITURGY and PAS Eucharistic Min Lector Usher/Greeter	ister			ch Masso	es?		
Musician/Choir Altar Server, Children's Litur Hospital Visits	ChildA	\dult					
MAINTENANCE Carpenter/Paint Electrician	er/Repairs Handyman	Plumber					
CHURCH COMMI Flowers/Decora Altar Cloth Car General Cleaning	tions e						
SOCIALS/FUNDR. Decorating Set Up/Clean U							
Planning							
ADULT ED. /SACI RCIA in Englis Young Adult Y	h (Adult Sacramer		R	CIA in Sp	oanish		
RELIGIOUS EDUC CCD Teacher CCD Aide	CATION						
Sacramental Re	ception Preparation	n and clea	n up				

OTHER: