

Today's Date: ____ / ____ / ____

PARISHIONER REGISTRATION FORM

PARISHIONER ID NUMBER _____

For office use only	
ES	_____
CCD	_____

MAILING SALUTATION

FAMILY LAST NAME				
ADDRESS (# & Street)	APT	CITY	STATE	ZIP CODE
CELL NUMBER ()	HOME NUMBER ()		PRIMARY EMAIL ADDRESS	

LIST ADULTS LIVING AT ABOVE ADDRESS (including yourself)

PREFIX <small>Mr & Mrs, Mr. Miss, Ms.</small>	FIRST NAME OF ADULTS	MARITAL STATUS	DATE OF BIRTH	OCCUPATION

LIST CHILDREN LIVING AT ABOVE ADDRESS

NAMES OF CHILDREN	DATE OF BIRTH	CHURCH OF BAPTISM	SCHOOL

IS ANYONE IN THE HOUSEHOLD IN NEED OF A SPECIAL PARISH MINISTRY? NAME: _____
Explain _____

IF INTERESTED -WHAT AREA OF PARISH LIFE WOULD YOU LIKE TO VOLUNTEER IN? _____

Electronic Giving Enrollment Form WeShare can be found on our website. It is an efficient way for you to contribute to your parish. Registering is just a few easy steps online www.stbarnabasbronx.org – click on **GIVE ONLINE**