

FAMILY NAME: _____

Street Address: _____

City: _____ State: _____ Zip: _____

MARITAL STATUS

If married, did this marriage take place in the Catholic Church?

NAME OF CHURCH _____

Home Phone : _____

Husband-Cell Phone: _____

Husband-Email: _____

Wife-Cell Phone: _____

Wife-Email: _____

Wife-Maiden Name: _____

For Office Use Only

Family ID # _____

Registry Date: _____

Request Envelopes?	HEAD OF HOUSEHOLD	SPOUSE	CHILD	CHILD	CHILD	CHILD	OTHER ADULTS IN HOUSEHOLD
FIRST NAME (And last if different from family name)							
ETHNIC ORIGIN							
RELIGION							
OCCUPATION or If in School... (School Name & Grade)							
SEX							
DATE OF BIRTH							

SACRAMENTS RECEIVED Please indicate YES /NO, DATES (if known), and LOCATION of Sacrament

BAPTISM <i>Name of Church</i>							
1ST EUCHARIST <i>Name of Church</i>							
CONFIRMATION <i>Name of Church</i>							
FIRST CONFESSION <i>Name of Church</i>							

Our Parish depends on the support of it's members sharing their God-given time, talents, and treasure. Please **indicate names** of family members who wish to be involved in parish life.

- Altar Server (Gr. 4-12) _____
- Altar Society _____
- Bilingual Ministry _____
- Choir Member / Musician _____
- Coffee & Doughnuts _____
- Eucharistic Minister _____
- Faith Formation Helper _____
- Fellowship Group _____
- Lay Pastors _____
- R.C.I.A. Team _____
- Lector _____
- Saturday "Fix It" Crew _____
- Sunday Usher _____
- Youth Group Team _____

Special talents you are willing to share with the Parish :



St. Didacus Parish

CONFIDENTIAL REGISTRATION FORM

This information will be held in the strictest confidence for pastoral use only. If you have any questions regarding the form or special concerns, please call the Parish Office at (619) 284-3472

Please complete this form and drop it in the collection basket at Mass or drop it into the Church Office mail box. For your convenience, you may also mail the form to :

St. Didacus Parish
4772 Felton Street.
San Diego, CA 92116