

**St. Paul Catholic Church, PO Box 998, Athens, AL 35612**  
**St. Paul Parishioner Registration Form**

Envelope Number: \_\_\_\_\_

Family Name: \_\_\_\_\_  
 (Last Name Only)

Date Registered: \_\_\_\_\_  
 (Today's Date)

Mailing Address: \_\_\_\_\_  
 (Street, number, Apartment, P.O. Box)  
 \_\_\_\_\_  
 (City, State, Zip)

Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name and Address of Previous Church: \_\_\_\_\_  
 Would you like your house blessed? \_\_\_\_ Would you like the diocesan newspaper -One Voice? \_\_\_\_ Do you want envelopes? \_\_\_\_

	Adult 1 (Head of House)	Adult 2 (Spouse)
First Name		
Last Name (if different from family name)		
Maiden/Birth Name		
Gender: M/F		
Birth date: (mm/dd/yyyy)		
Type of Work:		
Work/Business phone:		
Cell phone:		
Special Sacramental Needs:		
Religion:		
Marital Status: (single, married, widowed, divorced)		
Baptized: (Yes/No)		
Reconciliation: (Yes/No)		
First Communion: (Yes/No)		
Marriage: (Yes/No)		
Date Married: (mm/dd/yyyy)		
Place of Marriage:		

Others living with you (i.e. Children, Parents, Relatives, Friends)					
	Person 1	Person 2	Person 3	Person 4	Person 5
First Name					
Last Name (if different from family name)					
Gender: M/F					
Relationship:					
Birth date: (mm/dd/yyyy)					
Type of Work:					
Work/Business phone:					
Cell phone:					
Special Needs:					
Religion:					
Baptized: (Yes/No)					
Reconciliation: (Yes/No)					
First Communion: (Yes/No)					
Marriage: (Yes/No)					