



# St. John Vianney Catholic Church

*"40 years as a parish of Proclamation, Community, Service and Worship."*

## PRELIMINARY REGISTRATION

Please complete the following information and return it to the parish office.

Today's date: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone #: \_\_\_\_\_

Cell phone #: \_\_\_\_\_

Cell phone #: \_\_\_\_\_

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

Are you: Single: \_\_\_\_ Married: \_\_\_\_ Divorced: \_\_\_\_ Engaged: \_\_\_\_

Are you engaged to be married? Yes: \_\_\_\_ No: \_\_\_\_

If "Yes", what is your wedding date? \_\_\_\_\_

Do you have children? Yes: \_\_\_\_ No: \_\_\_\_

If you answered "yes", please list your children's information:

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ In school?: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ In school?: \_\_\_\_\_ Grade: \_\_\_\_\_

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ In school?: \_\_\_\_\_ Grade: \_\_\_\_\_

(IF NECESSARY, PLEASE CONTINUE ON BACK)

\*As part of the parish registration process, you will be required to attend a short orientation meeting. These meetings are held every other month. You will be contacted in the next few weeks to schedule your meeting.