



ST. JOSEPH PARISH REGISTRATION
 5055 GRANDVIEW ROAD
 HANOVER, PA 17331

DATE: _____

FOR A SINGLE PERSON:

LAST NAME	FIRST NAME & MI	DATE OF BIRTH	FAITH	OCCUPATION

PLEASE CIRCLE: WHITE/ AFRICAN AMERICAN/ AMERICAN INDIAN/ HISPANIC OR LATINO/ NATIVE HAWAIIAN/ OTHER _____

FOR A MARRIED COUPLE:

HUSBAND'S LAST NAME	FIRST NAME & MI	DATE OF BIRTH	FAITH	OCCUPATION

PLEASE CIRCLE: WHITE/ AFRICAN AMERICAN/ AMERICAN INDIAN/ HISPANIC OR LATINO/ NATIVE HAWAIIAN/ OTHER _____

WIFE'S MAIDEN NAME	FIRST NAME & MI	DATE OF BIRTH	FAITH	OCCUPATION

PLEASE CIRCLE: WHITE/ AFRICAN AMERICAN/ AMERICAN INDIAN/ HISPANIC OR LATINO/ NATIVE HAWAIIAN/ OTHER _____

MARRIAGE INFORMATION:

DATE OF MARRIAGE	NAME OF CHURCH/OTHER	PLACE OF CHURCH/OTHER

PLEASE CIRCLE: MARRIED DIVORCED SEPARATED WIDOW/WIDOWER

CHILDREN LIVING IN HOUSEHOLD UNDER AGE 23:

LAST NAME	FIRST NAME & MIDDLE INITIAL	DATE OF BIRTH	BAPTIZED? IF YES, DATE OF BAPTISM	SCHOOL ATTENDING	GRADE

ADDRESS:

STREET	CITY	STATE	ZIP CODE

CONTACT NUMBERS:

NAME	NUMBER	CIRCLE ONE	EMAIL ADDRESS
		CELL/ HOME/ WORK	
		CELL/ HOME/ WORK	
		CELL/ HOME/ WORK	
		CELL/ HOME/ WORK	

OTHERS LIVING AT SAME ADDRESS (GRANDPARENTS, AUNT/UNCLE, ETC.):

LAST NAME	FIRST NAME & MI	DATE OF BIRTH	OCCUPATION	RELATION	FAITH

WOULD LIKE SOMEONE TO FOLLOW UP WITH YOU REGARDING SACRAMENTS?	YES	NO

PLEASE CIRCLE: BAPTISM/ COMMUNION/ CONFIRMATION/ MARRIAGE or CON-VALIDATION/ HOLY ORDERS/ CONFESSION/ ANNOINTING OF THE SICK