## St. Christina Church Family Registration Form

Family Registration			
Family ID #:	Today's D	ate://	
Family Name:			
Head: Last:	Firet:	Title	Suffix
Spouse: Last:	First: First:	Title:	Sumx
Name formats used in mailings:	I list Mailing Nama	I IIIe	Ex: Mr. and Mrs. John Smith
	Ex: John & Mary Formal:		Ex: Mr. and Mrs. Sonn Smith
Informal Salutation:	Ex. John & Mary Formal:		EX. IVIT. AND IVITS. STITUT
Street Address Line 1:	Street City/S	State:	
Street Address Line 2:			
Geo. Area Number:	Registered:	Family Status:	
Phone:	Description: Home/Office/	Cell/Other	Unlisted? Yes/No
Phone:	Description: Home/Office/	Cell/Other	Unlisted? Yes/No
Email:	Send Email?		
Mailing Address: Line 1:	c	City/State:	
(if different) Line 2:	Z	<u></u>	
Member Registration			
Member Name:			
Last Name:	First Name:	Middle:	
Nickname:	Title:	Suffix:	
Maiden Name:			
Name formats used in mailings:	Mailing Name:		Ex: Jeanne Van Loon
Informal Salutation:	Ex: Jeanne Formal Salutation:		Ex: Mrs. Van Loon
Personal Information:	Relationship:		
Grade/Degree:			
Language:	Ethnicity:	Birthdate:	
Religion:	Disability:	Occupation:	
Employed:	Employer:	School:	
Location:	Attendance:		
Phone: Type:	Unl: Y/N Email:	 Type	· Prefer Email? Y/N
Phone: Type: _	Unl: <u>Y/N</u> Email:	Туре	:Prefer Email? Y/N
Birthplace:			
	Unl: <u>Y/N</u> Email: Mother:		: Prefer Email? Y/N n Name:
Birthplace: Father:	Mother:	Maide	n Name:
Birthplace: Father: Baptism: Name/Extra Info:	Mother: Date:	Maide	
Birthplace: Father: Baptism: Performed by:	Mother: Date: Church Name:	Maide	n Name:
Birthplace: Father: Baptism: Name/Extra Info: Performed by: Sponsor:	Mother: Date: Date: Church Name: Church Address:	Maide	n Name:
Birthplace: Father: Baptism: Performed by:	Mother: Date: Church Name:	Maide	n Name:
Birthplace: Father: Baptism: Name/Extra Info: Performed by: Sponsor: Sponsor:	Mother: Date: Church Name: Church Address: City/State/Zip	Maide Status: <u>Ar</u>	n Name: pprox. / Yes / No
Birthplace: Father:	Mother: Date: Church Name: Church Address: City/State/Zip Date:	Maide Status: <u>Ar</u>	n Name:
Birthplace: Father:	Mother: Date: Church Name: Church Address: City/State/Zip Date: Church Name:	Maide Status: <u>Ar</u>	n Name: pprox. / Yes / No
Birthplace: Father:	Mother: Date: Church Name: Church Address: City/State/Zip Date: Church Name: Church Address:	Maide Status: <u>Ar</u>	n Name: pprox. / Yes / No
Birthplace: Father:	Mother: Date: Church Name: Church Address: City/State/Zip Date: Church Name:	Maide Status: <u>Ar</u>	n Name: pprox. / Yes / No
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Birthplace: Father:	Mother: Date: Church Name: Church Address: City/State/Zip Date: Church Name: Church Address:	Maide Status: Ag	n Name: pprox. / Yes / No
Birthplace: Father: Baptism: Performed by: Sponsor: Sponsor: First Comm: Performed by: Sponsor: Sponsor: Confirm: Performed by: Name/Extra Info: Performed by: Name/Extra Info: Confirm: Performed by: Confirm: Performed by: Confirm: Performed by: Confirm:	Mother: Date: Church Name: Church Address: City/State/Zip Date: Church Name: Church Address: City/State/Zip Date: Date: Church Name:	Maide Status: Ag	n Name:
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## St. Christina Church Family Registration Form

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Member Regis	tration					
Member Name Last Name: Nickname: Maiden Nan Name formats Informal Sa	ne: s used in mailings:		ling Name: nal Salutation:	Middle: Suffix:	Ex: Jeanne Van Loon Ex: Mrs. Van Loon	
Personal Info Grade/Degr Language: Religion: Employed: Location:		Relationship: Gender: Ethnicity: Disability: Employer: Attendance:		Type: Marital Status: Birthdate: Occupation: School:		
Phone:	Туре: _	UnI: <u>Y/N</u>	Email:	Туре: _	Prefer Email?	<u>Y/N</u>
Birthplace: Birth Father:		Birth Mother	:	Maiden Name:		
Baptism: Performed by: Sponsor: Sponsor:	Name/Extra Info:	CI CI	ate: hurch Name: hurch Address: ity/State/Zip	Status: <u>App</u>	rox. / Yes / No	
First Comm: Performed by: Sponsor: Sponsor:	Name/Extra Info:	Da Ci Ci	ate: hurch Name: hurch Address: ity/State/Zip	Status: App	rox. / Yes / No	
Confirm: Performed by: Sponsor: Sponsor:	Name/Extra Info:	CI CI	ate: hurch Name: hurch Address: ity/State/Zip	Status: <u>App</u>	rox. / Yes / No	
Deceased: Performed by: Sponsor: Sponsor:	Name/Extra Info:	Da CI CI	<u> </u>	Status: <u>App</u>	rox. / Yes / No	
Marriage: Performed by: Sponsor: Sponsor:	Name/Extra Info:	CI CI	ate: hurch Name: hurch Address: ity/State/Zip	Status: App	rox. / Yes / No	
I would like to	volunteer the following	skills:				
I would like to	volunteer for the follow	ing ministries:				