

**St John the Evangelist Parish**

**FAMILY REGISTRATION**

271 Winchester St, Warrenton, VA 20186 (540) 347-2922

Reg. Date: \_\_\_/\_\_\_/\_\_\_

Envelope #: \_\_\_\_\_

Last Name \_\_\_\_\_ Mailing Name (ie Mr. & Mrs. John Doe): \_\_\_\_\_

Mailing Address1: \_\_\_\_\_ Address2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Emergency Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

Former Parish: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

**Head of House Member Information**

**H**  
**O**  
**O**  
**U**  
**S**  
**E**  
**1**

First Name / Nickname: \_\_\_\_\_ / \_\_\_\_\_ Maiden \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_  
 Work Phone / Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Religion: \_\_\_\_\_  
**Sacrament Info:** Baptism *Catholic?* Eucharist Penance Confirmation  
**Date and Parish**  \_\_\_/\_\_\_/\_\_\_  \_\_\_/\_\_\_/\_\_\_  \_\_\_/\_\_\_/\_\_\_  \_\_\_/\_\_\_/\_\_\_  
 E-mail: \_\_\_\_\_ Occupation / Employer: \_\_\_\_\_ / \_\_\_\_\_

**H**  
**O**  
**O**  
**U**  
**S**  
**E**  
**2**

First Name / Nickname: \_\_\_\_\_ / \_\_\_\_\_ Maiden \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_  
 Work Phone / Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Religion: \_\_\_\_\_  
**Sacrament Info:** Baptism *Catholic?* Eucharist Penance Confirmation  
**Date and Parish**  \_\_\_/\_\_\_/\_\_\_  \_\_\_/\_\_\_/\_\_\_  \_\_\_/\_\_\_/\_\_\_  \_\_\_/\_\_\_/\_\_\_  
 E-mail: \_\_\_\_\_ Occupation / Employer: \_\_\_\_\_ / \_\_\_\_\_

Marital Status (*Single, Married, Separated, Divorced, Annulled*): \_\_\_\_\_ Valid Catholic Marriage? \_\_\_\_\_ Wedding Date: \_\_\_/\_\_\_/\_\_\_

Church of Marriage: \_\_\_\_\_ Church City and State: \_\_\_\_\_

**Dependent Children**

Child's Name	Sex	Birth Date	Birth Place		
_____	_____	___/___/___	_____		
<b>Sacrament, Date and Parish</b>	Baptism	<i>Catholic?</i>	Eucharist	Penance	Confirmation
<input type="checkbox"/> ___/___/___	<input type="checkbox"/>	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___
<b>Received:</b> _____					

Child's Name	Sex	Birth Date	Birth Place		
_____	_____	___/___/___	_____		
<b>Sacrament, Date and Parish</b>	Baptism	<i>Catholic?</i>	Eucharist	Penance	Confirmation
<input type="checkbox"/> ___/___/___	<input type="checkbox"/>	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___
<b>Received:</b> _____					

Child's Name	Sex	Birth Date	Birth Place		
_____	_____	___/___/___	_____		
<b>Sacrament, Date and Parish</b>	Baptism	<i>Catholic?</i>	Eucharist	Penance	Confirmation
<input type="checkbox"/> ___/___/___	<input type="checkbox"/>	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___	<input type="checkbox"/> ___/___/___
<b>Received:</b> _____					

Please fill in all blank boxes and provide changes where necessary. If you need to add additional members please use a second form.