

IMMACULATE CONCEPTION PARISH

ANNANDALE, NEW JERSEY

REGISTRATION FORM

Office Use Only

Envelope# _____

Parish Soft _____

File Copy _____

Insta Set _____

Welcome _____

FAMILY NAME _____ Home Phone () _____

Address _____ Cell _____

City _____ Zip _____ Cell _____

Mailing Address (if different from above) _____

_____ Email _____

Previous Parish (Name, City, State): _____

Mass Attendance (please check one) Weekly _____ Regularly _____ Occasionally _____ Seldom _____

May we release your name to our Welcome Committee? Yes _____ No _____

Would you prefer Offertory Envelopes to be mailed to you _____ or use Faith Direct (an electronic giving service)? _____
(Please check one)

Name of Person Completing Form _____ Date _____

If married outside of the Catholic Church, would you like to speak to a priest about having your marriage blessed if possible?

If you have not yet been Baptized or have not completed all of your Sacraments, would you be interested in learning more about RCIA?

Adult children over the age of 21 (unless in college) should be registered independently of their parents.

List All Family Members Including Self First Name, MI	Maiden Name And/or Last Name if Different than Family Name	Family Relationship	M/F	Date of Birth	Marital Status SMWD	Date and Place of Marriage	Marriage Recognized By Catholic Church Y/N	Religion	Faith of Baptism	First Eucharist Y/N	Confirmed Y/N	Occupation

Space to add additional family members on back

