

NEW PARISHIONER REGISTRATION FORM

CATHOLIC COMMUNITY OF ST. PIUS X * 1025 East Madison Street * Lombard, IL 60148 * 630-627-4526
www.stpiuslombard.org email: parishoffice@stpiuslombard.org FAX 630-495-5926

Office Use: Date Reg. Envelope # 06/07/12	Family Last Name _____	E-mail Address _____
	Mailing Address _____ City _____	State _____ Zip _____
	Primary Phone # _____ <input type="checkbox"/> Unlisted	Husband Cell # _____ <input type="checkbox"/> Unlisted
		Wife Cell # _____ <input type="checkbox"/> Unlisted

MEMBERS OF HOUSEHOLD - Include only those whose permanent residence is as shown above. If multiple families reside at the same address, please complete a separate registration form for each family. Contact the Parish Office at 630-627-4526 if you have questions.

	Head	Spouse	Child – 1	Child – 2	Child – 3	Child – 4	Child – 5	Other Than Child
First Name								
Last Name								
Maiden Name								
Birth Date								
Occupation								
Sex	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F
Religion								
Baptism (yes or no)								
First Comm. (yes or no)								
Confirmation (yes or no)								
(1) Marital Status								
(2) Date/Place of Marriage								

(1) M = Married S=Single Sep = Separated W=Widowed D=Divorced (2) CC = Catholic Church C = Civil Ceremony O =Other