

## Registration form - St. Joseph Catholic Church

732 18th Ave E, Seattle, WA 98112, (206) 324-2522

**YES! I/We commit to being active, participating, and contributing members of St. Joseph Parish**

\_\_\_\_\_ (signature of family representative)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (today's date)

YOUR GIVEN NAME	CATHOLIC SACRAMENTS	MARITAL	BIRTHDATE
(First, Middle Initial, Last)	received	status	mm/dd/yyyy
	<input type="checkbox"/> Baptism <input type="checkbox"/> Confirmation <input type="checkbox"/> 1st Reconciliation <input type="checkbox"/> Marriage	<input type="checkbox"/> Spouse <input type="checkbox"/> Unmarried	/ /
NAME YOU LIKE TO BE CALLED	<input type="checkbox"/> 1st Eucharist	GENDER	
		F / M	

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ ( Home  Work  Cell)

Alternate telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ ( Home  Work  Cell)

Primary email address: \_\_\_\_\_ (all email addresses will be kept private)

Alternate email address: \_\_\_\_\_ (all email addresses will be kept private)

Tell us about whom else you would like to register (for additional names, attach a separate sheet)

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NAME PERSON LIKES TO BE CALLED	<input type="checkbox"/> 1st Eucharist	GENDER	
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		F / M	

Things we should know about your family: \_\_\_\_\_

- Please send me Sunday Offering Envelopes.
- Please send me information on EFT (Electronic Fund Transfer).
  - I have included St. Joseph Parish in my estate plans.
- I am interested in leaving a legacy gift to St. Joseph Parish. Please contact me.
  - Please do NOT include contact information in the parish directory.
- Please do NOT include my/our images in print publications, online publications, or social media. I am attaching pictures of all persons included in this request.

FOR OFFICE USE ONLY: \_\_\_\_\_ ID number/ \_\_\_\_\_ date