

We will be joining: _____ St. John Vianney Catholic Church 901 S. Prairie Ave. Fairmont MN 56031 (507) 235-5535
 _____ Holy Family Catholic Church 2481 50th St. East Chain, MN. 56031 (507) 773-4491

Office Use

HOUSEHOLD REGISTRATION FORM

Today's Date _____
 Would you like to receive Contribution
 Envelopes? Y _____ N _____

Env # _____
 Nwcomrs _____
 Courier _____

Last Name: _____ Marital Status: _____ Marriage Date: __/__/__
 Address: _____ Marriage valid in the Catholic Church: Yes ___ No ___
 City/State/Zip: _____ Winter Address: _____ From __/__/__ to __/__/__
 Home Phone: (____) _____ - _____ E-mail Address: _____ Date Registered _____

Member Information

Head of Household
Name
 First _____ MI _____ Last (If Different) _____
 Male/Female Maiden Name: _____
 Date of Birth: __/__/__ State: ____
Phone Numbers
 Work: _____ Ext. _____
 Cellular: _____ Fax: _____
Employer/Occupation: _____
Sacraments (Leave dates blank if unknown.)
 Baptism _____/____/____
 1st Eucharist _____/____/____
 1st Reconciliation _____/____/____
 Confirmation _____/____/____
 Church/City & State of Baptism: _____
 Religion: _____
 Primary Language: _____ Secondary: _____
Emergency Contact (Other than household members)
 Name: _____ Number: _____
Are you interested?
 Pastoral Council Finance Com.
 Eucharistic Minister Lector
 Choir/Cantor Sacristan
 Hospitality/Greeter
 Other _____
 (Volunteer – Funerals, Catechist, Collections Counter, Scrip Sales, Security/Lock Church, Hope Shop, Meals on Wheels, etc.)

Spouse Child Other
Name
 First _____ MI _____ Last (If Different) _____
 Male/Female Maiden Name: _____
 Date of Birth: __/__/__ State: ____
Phone Numbers
 Work: _____ Ext. _____
 Cellular: _____ Fax: _____
Occupation/ Employer: _____
Sacraments (Leave dates blank if unknown.)
 Baptism _____/____/____
 1st Eucharist _____/____/____
 1st Reconciliation _____/____/____
 Confirmation _____/____/____
 Church/City & State of Baptism: _____
 Religion: _____
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