



_____ **Nativity of the Lord** _____ **St. Paul Parish** _____ **St Veronica Congregation**
 (Check which parish you wish to join and return to Parish Office 353 E. Norwich St. Milw, WI 53207)

_____ Envelope Number

_____ Date Registered

Welcome to our Parish! To better serve your spiritual needs, please tell us about you and your family. Please note there are two sides to this form. *Please print clearly using dark ink. Thank you!*

HEAD OF HOUSEHOLD INFORMATION

SALUTATION:

Miss Mr. Mrs. Ms M/M Other
 (Circle One)

_____ (First, Middle, Last)

GOES BY: _____
 (If Different)

MAIDEN NAME: _____
 (If Applicable)

HOW DO YOU LIKE YOUR MAIL ADDRESSED?: Miss Mr. Mrs. Ms M/M
 (Circle One)

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE NUMBER (____) _____ Listed Unlisted Landline Mobile

DATE OF BIRTH: (MM/DD/YEAR) ____/____/____ **FORMER PARISH:** _____

MARITAL STATUS:

Church Marriage Married Single Separated Divorced Widowed

RELIGION: _____

GENDER: Male Female

OCCUPATION: _____ **EMPLOYER:** _____ **BUS PHONE:** _____
 (optional) (optional)

EMAIL: _____

Sacrament	Date (mm/dd/year)	Parish	City & State
Baptism	/ /		
Communion	/ /		
Confession	/ /		
Confirmation	/ /		
Marriage	/ /		

Spouse Information

SALUTATION:

Miss Mr Mrs Ms M/M
(Circle One)

_____ (First, Middle, Last)

GOES BY: _____
(If Different)

MAIDEN NAME: _____
(If Applicable)

HOW DO YOU LIKE YOUR MAIL ADDRESSED?: Miss Mr Mrs Ms M/M
(Circle One)

ADDRESS: _____

CITY: _____ **ST ATE:** _____ **ZIP:** _____

PHONE NUMBER (____) _____ Listed Unlisted Landline Mobile

DATE OF BIRTH: (MM/DD/YEAR) ____/____/____

MARITAL STATUS:

Church Marriage Married Single Separated Divorced Widowed

GENDER: Male Female **RELIGION:** _____

OCCUPATION: _____ **EMPLOYER:** _____ **BUS PHONE:** _____
(optional) (optional)

EMAIL: _____

Sacrament	Date (mm/dd/year)	Parish	City & State
Baptism	/ /		
Communion	/ /		
Confession	/ /		
Confirmation	/ /		
Marriage	/ /		

Please take a moment and fill out information on your minor children. If you need more forms, please let us know or feel free to make photocopies of this information.

CHILD

NAME: _____
(First, Middle, Last)

GOES BY: _____
(If Different)

DATE OF BIRTH:(MM/DD/YEAR) ____/____/____

RELIGION: _____

GENDER: Male Female

ETHNICITY: _____
(Optional)

SCHOOL ATTENDING: _____

GRADE: _____

ATTENDING CHRISTIAN FORMATION: Yes No

Sacrament	Date (mm/dd/yyyy)	Parish	City & State
Baptism	/ /		
Communion	/ /		
Confession	/ /		
Confirmation	/ /		

CHILD

NAME: _____
(First, Middle, Last)

GOES BY: _____
(If Different)

DATE OF BIRTH:(MM/DD/YEAR) ____/____/____

RELIGION: _____

GENDER: Male Female

ETHNICITY: _____
(Optional)

SCHOOL ATTENDING: _____

GRADE: _____

ATTENDING CHRISTIAN FORMATION: Yes No

Sacrament	Date (mm/dd/yyyy)	Parish	City & State
Baptism	/ /		
Communion	/ /		
Confession	/ /		
Confirmation	/ /		

CHILD

NAME: _____
(First, Middle, Last)

GOES BY: _____
(If Different)

DATE OF BIRTH:(MM/DD/YEAR) ____/____/____

RELIGION: _____

GENDER: Male Female

SCHOOL ATTENDING: _____

GRADE: _____

ATTENDING CHRISTIAN FORMATION: Yes No

Sacrament	Date (mm/dd/yyyy)	Parish	City & State
Baptism	/ /		
Communion	/ /		
Confession	/ /		
Confirmation	/ /		

CHILD

NAME: _____
(First, Middle, Last)

GOES BY: _____
(If Different)

DATE OF BIRTH:(MM/DD/YEAR) ____/____/____

RELIGION: _____

GENDER: Male Female

SCHOOL ATTENDING: _____

GRADE: _____

ATTENDING CHRISTIAN FORMATION: Yes No

Sacrament	Date (mm/dd/yyyy)	Parish	City & State
Baptism	/ /		
Communion	/ /		
Confession	/ /		
Confirmation	/ /		