

Envelope # \_\_\_\_\_  
 Last name: \_\_\_\_\_

Date: \_\_\_\_\_

**St John the Baptist Roman Catholic Church**  
**120 W. Main Street, Front Royal, VA 22630**  
**Registration Form**

**PLEASE PRINT:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Spouse \_\_\_\_\_ M/M Mr. Mrs. Ms. Dr.  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone # (H) \_\_\_\_\_ Unlisted \_\_\_\_\_ (W) \_\_\_\_\_ Cell Phone/phones \_\_\_\_\_  
 Email/emails \_\_\_\_\_  
 Marital Status: Catholic Church Marriage \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Sep \_\_\_\_\_ Widowed \_\_\_\_\_ Div \_\_\_\_\_ Annuled \_\_\_\_\_  
 Church Attendance: Regular \_\_\_\_\_ Frequent \_\_\_\_\_ Occasional \_\_\_\_\_ Seldom \_\_\_\_\_ Registration date: \_\_\_\_\_

|  | Head of Household | Spouse | Other/Child | Child | Child | Child |
|--|-------------------|--------|-------------|-------|-------|-------|
| First Name                               |                   |        |             |       |       |       |
| Last Name/<br>Maiden name of Spouse      |                   |        |             |       |       |       |
| Marital Status                           |                   |        |             |       |       |       |
| Sex of Child (M/F)                       |                   |        |             |       |       |       |
| Handicap                                 |                   |        |             |       |       |       |
| Religion                                 |                   |        |             |       |       |       |
| Convert (Y/N)                            |                   |        |             |       |       |       |
| Occupation                               |                   |        |             |       |       |       |
| School Attending                         |                   |        |             |       |       |       |
| Degree/<br>Highest grade completed       |                   |        |             |       |       |       |
| Attend CCD (Y/N)                         |                   |        |             |       |       |       |
| Birth date<br>Month/Day/Year/State       |                   |        |             |       |       |       |
| Baptized (Y/N)<br>Month/Day/Year         |                   |        |             |       |       |       |
| Place of Baptism<br>Church/State         |                   |        |             |       |       |       |
| First Communion<br>(Y/N)Mo/Day/Yr        |                   |        |             |       |       |       |
| Place of First<br>Communion/Church/State |                   |        |             |       |       |       |
| Confirmation (Y/N)<br>Month/Day/Year     |                   |        |             |       |       |       |
| Place of Confirmation<br>Church/State    |                   |        |             |       |       |       |
| Marriage (Y/N)<br>Church/State           |                   |        |             |       |       |       |
| Ministries                               |                   |        |             |       |       |       |
| Ministries                               |                   |        |             |       |       |       |