



Catholic Community of St. Peter



406 Forman Avenue
Point Pleasant Beach, NJ 08742

FAMILY REGISTRATION FORM

Last Name _____ Adult's First Name(s) _____

Mailing Address: _____

Home Phone _____ Cell Phone _____

Family Email _____ Date _____

INDIVIDUAL MEMBER INFORMATION:

Adult #1 Name _____ Gender: M ___ F ___

Marital Status _____ Family Role _____

Maiden Name (if applicable) _____ Special Needs _____

Occupation _____ Date of Birth _____

Sacrament info: Catholic ___ Baptism ___ Confirmation ___ Other (explain) _____

Adult #2 Name _____ Gender: M ___ F ___

Marital Status _____ Family Role _____

Maiden Name (if applicable) _____ Special Needs _____

Occupation _____ Date of Birth _____

Sacrament info: Catholic ___ Baptism ___ Confirmation ___ Other (explain) _____

First Child _____ Gender: M ___ F ___

Date of Birth _____ Special Needs _____

Sacrament info: Catholic ___ Baptism ___ Confirmation ___ Other (explain) _____

Second Child _____ Gender: M ___ F ___

Date of Birth _____ Special Needs _____

Sacrament info: Catholic ___ Baptism ___ Confirmation ___ Other (explain) _____

Third Child _____ Gender: M ___ F ___

Date of Birth _____ Special Needs _____

Sacrament info: Catholic ___ Baptism ___ Confirmation ___ Other (explain) _____