

ST. MARON MARONITE CATHOLIC CHURCH
602 University Avenue NE, Minneapolis, MN 55413

Parish Registration Form
(Confidential-Family Record)

Please print this form then fill and mail or bring to the parish. Thank you.

Attention: Please clearly *print* all information –Give as much information as possible

Date: _____

Family Name: _____ First Name: _____

Spouse: _____ Maiden Name: _____

Address: _____

City, State, State: _____

Home Telephone: _____ (X) ___ if a private, unlisted number

Cell Phone: _____ E-mail: _____

Marital Status: Single _____ Married: _____ Widow(er) _____ Separated: _____ Divorced: _____

Occupations: Self: _____ Spouse: _____

City of Birth: Self: _____ Spouse: _____

Rite of the Church Baptized In:: (Maronite, Melkite, Roman Catholic, Orthodox, Protestant Denomination)

Self: _____ Spouse: _____

Date & Location of Marriage: _____

Children (First Name & Last if different from family) Living at Home	Sex (M/F)	Date of Birth	Baptism Date & Location	First Communion Date & Location

Willing to Assist in the Following: Religious Ed _____ Ushering _____ Choir/Music _____ Youth _____

Special Events _____ Building Maintenance _____

Additional Comments, Special Interests or Needs: _____
