St. Boniface
Family Blank Registration Form
Family Registration

		r army registration						
ID/Env #:								
Family Name:	Head of Household:	Spouse:						
	Last Name:	Last Name	e:					
	First Name:	First Name	<b>:</b>					
	Title:	Title:	<u> </u>					
	Suffix:							
	Name formats used in m	ailings:						
	Mailing Name:		Example: Mr. & Mrs. John Smith					
	Informal Salutation:		Example: John & Many					
	Formal Salutation:		Example: Mr. & Mrs. Smith					
	1 ormai oaidtation:		Example: IVII. & IVIIS. SITIIUI					
Family Info:	Registered:	Family Statu	ıs:					
	Street Address Line 1:							
	Street Address Line 2:							
	Street City/State:	Street Zip:						
	Geo. Area Number:							
	Phone Number	Description	Unlisted?					
		Home/Office/Cell/Other	Yes/No					
		Home/Office/Cell/Other	Yes/No					
	Email:		Send Email when possible? Yes/No					
Mailing Addr.:	Mailing Address Line 1:							
(if different than street):	Mailing Address Line 2:							
	Mailing City/State:	Mailing Zip:						
Alternate Addr.:	Alt. Address Line 1:							
	Alt. Address Line 2:							
	Alt. City/State:	Alt. Zip:						
		Active From Month: Day: To: Month: Day:						
		Send mail to alternate address?	Yes/No					
	Alt. Address Remarks:							

Remarks:

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	(member: _	for	-		)			
Member Detail:	Last Name: First Name: Middle: Nickname: Maiden Name: Title: Suffix:	N	Name formats used in i Mailing Name: Informal Salutation: Formal Salutation:		Ex: Mr. John Smith  Ex: John  Ex: Mr. Smith			
Personal:	Relationship: Grade/Degree: Marital Status: Language: Ethnicity: Religion: School: Disability: Occupation: Receives Separ	rate Statement? Yes/		Type: Gender: Birthdate: Location:	Head/Spouse/Adult/Young Adult/Child/Other  Male/Female / /			
Phone/Email:	Phone: Phone: Email:	Type: Home/Office/Cell/Other Unlisted? Yes/No Type: Home/Office/Cell/Other Unlisted? Yes/No Type: Home/Office/Other						
Remarks: Sacraments:	craments: Birthplace: Father:							
	Baptism:	Baptismal Name: Date: / / Performed by: Church Name: Church Address: Sponsor(s):	1		Approximate / Yes / No / Unsure			
	1st Communion:	Extra Info: Date: / / Performed by: Church Name: _ Church Address: _ Sponsor(s):		Status:	Approximate / Yes / No / Unsure			
	Confirmation:	Confirmation Name: Date: / / Performed by: Church Name: Church Address:		Status:	Approximate / Yes / No / Unsure			

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			Member Registra	ation				
	(member: _		for family:		)			
	1st Reconciliation:	Extra Info: Date: / Performed by: Church Name: Church Address: Sponsor(s):	/	_ Status:	Approximate / Yes / No / Unsure			
	Marriage:	Spouse Name: Date: / Performed by: Church Name: Church Address: Witness(es):	/	_ Status:	Approximate / Yes / No / Unsure / Annulled			
Talents:	I would like to volunteer the following skills:							
Ministries:	I would like to volunteer for the following ministries:							