

St. James Catholic Church

213 East 8th Street
Mead, NE 68041
(402) 624-3555

Date of Registration _____

PARISH REGISTRATION FORM

PLEASE COMPLETE BOTH SIDES!

Individual Information

Head of Household

Spouse

Family Name

First Name

Middle Name

Maiden Name

Address

City / State / Zip

Home Phone Number

Cell Phone Number

E-Mail Address

Date of Birth

Religion

Marriage Status

Married / Single / Single Parent / Widowed / Divorced

Married / Single / Single Parent / Widowed / Divorced

Church Name

City/State

Marriage Date

Baptized

(Yes-No / Place / Date)

First Communion

(Yes-No / Place / Date)

Confirmation

(Yes-No / Place / Date)

Occupation

Employer

Work Phone

Gender

Male / Female

Male / Female

Do you have an occupation or special talent you would be willing to share with St. James Church? If so, please list them below and we will enter that information in our records so that we may call on you in a time of need.

OTHER SIDE 

