

CHURCH OF SAINT DENIS
90 UNION AVENUE MANASQUAN, NJ 08736
Phone- 732-223-0287 Fax- 732-528-1901 Email- st.denis@verizon.net

Parish Registration Form

Last Name _____ First Name(s) _____

Mailing Name (i.e. Mr. & Mrs. John Doe) _____

Address _____

Primary Phone _____ Emergency Phone _____

Family Email Address _____

Request Church Envelopes? Yes _____ No _____

Individual Member Information

Name (first, middle, last) _____

Role(husband, wife, head) _____

Maiden Name _____ DOB (mm/dd/yyyy) _____

Email Address _____ Work Phone _____

Cell Phone _____ Languages Spoken _____

Occupation _____ Level of Education _____

Religion _____

Date Name of Church City State

Baptism _____

Reconciliation _____

First Communion _____

Confirmation _____

Marriage _____

Individual Member Information

Name (first, middle, last) _____

Role(husband, wife, head) _____

Maiden Name _____ DOB (mm/dd/yyyy) _____

Email Address _____ Work Phone _____

Cell Phone _____ Languages Spoken _____

Occupation _____ Level of Education _____

Religion _____

Date Name of Church City State

Baptism _____

Reconciliation _____

First Communion _____

Confirmation _____

Marriage _____

Dependent Child Information

Name (first, middle, last) _____

Relationship to Head of Household _____

Gender _____ DOB (mm/dd/yyyy) _____

Religion _____

Date Name of Church City State

Baptism _____

Reconciliation _____

First Communion _____

Confirmation _____

Dependent Child Information

Name (first, middle, last) _____

Relationship to Head of Household _____

Gender _____ DOB (mm/dd/yyyy) _____

Religion _____

Date Name of Church City State

Baptism _____

Reconciliation _____

First Communion _____

Confirmation _____

Dependent Child Information

Name (first, middle, last) _____

Relationship to Head of Household _____

Gender _____ DOB (mm/dd/yyyy) _____

Religion _____

Date Name of Church City State

Baptism _____

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