

St. John Vianney Catholic Church

105 Vianney Lane
Prince Frederick, MD 20678

Office: 410-535-0223
www.SJVChurch.net

All Are Welcome

REGISTRATION FORM

Date

Family (Last) Name	Mailing Address (Street or PO Box)	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Street Address (if different from mailing address)	Home Phone	Family's Primary Email Address
<input type="text"/>	<input type="text"/>	<input type="text"/>

Parish of Previous Registration (Church Name & Location)

Members of the Household

First Name, Middle Initial, Last Name	Date of Birth	M/F	Marital Status	Ethnicity	Language	Religion	Occupation or School Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Email Address	Cell Phone	Employment
<input type="text"/>	<input type="text"/>	<input type="text"/>

Check Sacraments Received	Baptism	Reconciliation	Communion	Confirmation	Catholic Marriage	Mass Attendance
Enter Date if known	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

First Name, Middle Initial, Last Name	Date of Birth	M/F	Marital Status	Ethnicity	Language	Religion	Occupation or School Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Relation to First Individual	Email Address	Cell Phone	Employment
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Check Sacraments Received	Baptism	Reconciliation	Communion	Confirmation	Catholic Marriage	Mass Attendance
Enter Date if known	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

First Name, Middle Initial, Last Name	Date of Birth	M/F	Marital Status	Ethnicity	Language	Religion	Occupation or School Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Relation to First Individual	Email Address	Cell Phone	Employment
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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Enter Date if known	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

First Name, Middle Initial, Last Name	Date of Birth	M/F	Marital Status	Ethnicity	Language	Religion	Occupation or School Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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First Name, Middle Initial, Last Name	Date of Birth	M/F	Marital Status	Ethnicity	Language	Religion	Occupation or School Grade
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Relation to First Individual	Email Address	Cell Phone	Employment
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Please use a second form for additional household members.

Special needs or situations that you wish to call to our attention?

Parish ministries or organizations you are interested in:

Talents I have that would be useful to the parish:

Please have a parish staff member contact me

Do you prefer to make your contributions to support the Parish with Weekly envelopes , or Electronic Bank Transfer*? *If you choose this option, we will send you an authorization form. Any questions, call the office 410-535-0223.

Please mail, Email or drop this completed form in offertory basket. Thank you for taking time to register.