

# Saint Peter Catholic Church Parish Registration Form

After completing this form, you can email it to the parish office at [secretary@stpetermontgomery.net](mailto:secretary@stpetermontgomery.net). Or you can mail it or drop it by the parish office at 219 Adams Street, Montgomery AL 36101. Thank you again.

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	Dr.	Mr.	Mrs.	Miss		Military Rank
Last Name			First Name		MI	
Date of Birth						
Street Address						
City			State			Zip
Home Phone			Work Phone			Cell
Email Address			Sex	Male		Female
Marital Status	Single		Married	Divorced		Widowed
Marriage Date			Married in Catholic Church	Yes		No
Baptized	Yes	No		Date if Known		
Communion	Yes	No		Date if Known		
Confirmation	Yes	No		Date if Known		
Employed by and/ or School Attending						
Occupation/ Position			Catholic	Yes		No
Education Highest Level						
Interest/Ministries						

**The following information pertains to the spouse or relative living with you**

Relationship to head of household	Spouse	Child	Parent		
	Dr.	Mr.	Mrs.	Miss	Military Rank
Last Name	First Name		MI		
Date of Birth					
Home Phone	Work Phone			Cell	
Email Address			Sex	Male	Female
Marital Status	Single	Married	Divorced	Widowed	
Marriage Date			Married in Catholic Church	Yes	No
Baptized	Yes	No	Date if Known		
Communion	Yes	No	Date if Known		
Confirmation	Yes	No	Date if Known		
Employed by and/or School Attending					
Occupation/ Position			Catholic	Yes	No
Interest/Ministries					

**Other members of your household**

Name	Gender		Birth Date	Current School
	M	F		
Check if	Baptized	Communion	Confirmation	

Name	Gender		Birth Date	Current School
	M	F		
Check if	Baptized	Communion	Confirmation	

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Name	Gender		Birth Date	Current School
	M	F		
Check if	Baptized		Communion	Confirmation

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Name	Gender		Birth Date	Current School
	M	F		
Check if	Baptized		Communion	Confirmation

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Name	Gender		Birth Date	Current School
	M	F		
Check if	Baptized		Communion	Confirmation

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Name	Gender		Birth Date	Current School
	M	F		
Check if	Baptized		Communion	Confirmation

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Comments or Questions

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