## St. Clare Catholic Church Registration Form

amily Name:			Address:					Phone:	
nv/lD:								Date Registered:	jistered:
Head of Household	Birth Date	Religion	Baptism	1st Comm	Confirm	Emai	Email Address	Occupation	Place of Empl
						2000			
Spouse/Significant Other	Birth Date	Religion	Baptism	1st Comm	Confirm	Emal	Email Address	Occupation	Place of Empl
Date Married:	N	Where Married:						Maiden Name:	
thers Living in Household	Relationship	p Gender Birth Date	ate Religion	Baptism 1	1st Comm Co	Confirm Pla	Place of Baptism	Email Address	Sch
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special Notations (VIRTUS training):	ning):								