

PLEASE PRINT

Cathedral of Saints Peter and Paul • Parish Registration Form

30 Fenner Street Providence, RI 02903 • Phone: 401-331-2434 • providencecathedral.org

Date: _____

Family Last Name: _____ Primary Phone #: _____ Prior member: **yes** **no** Phone Unlisted **yes** **no**

Address: _____ City _____ State _____ Zip _____ Member of Military **yes** **no**
Branch: _____

Marital Status: Married in Catholic Church Married in other Christian Church Civil marriage Single Divorced Widowed Engaged

Wedding Date: _____ Name of Church: _____ City/State: _____

Emergency Contact Name/Relationship: _____ Emergency Contact Phone: _____

I/We Will Contribute Through (choose one): Envelopes Provided by Cathedral Automatic Withdrawal Online Giving

<i>(Include all household members – attach separate sheet if needed)</i>			Birth Date	Gender	Baptism	Baptism Detail <i>(Church Name, City & State)</i>	Eucharist	Confirmation
First Name	Middle Name	Last Name						
Head of Household				F M	yes no	Church: _____	yes no	yes no
_____						City/St: _____		
Spouse				F M	yes no	Church: _____	yes no	yes no
_____						City/St: _____		
Child - 1				F M	yes no	Church: _____	yes no	yes no
_____						City/St: _____		
Child - 2				F M	yes no	Church: _____	yes no	yes no
_____						City/St: _____		
Child - 3				F M	yes no	Church: _____	yes no	yes no
_____						City/St: _____		
Child - 4				F M	yes no	Church: _____	yes no	yes no
_____						City/St: _____		

Head of Household Information:

Religion/Church: _____

Cell Phone #: _____ Work Phone #: _____

Email Address: _____

Occupation/Employer: _____

Primary Language Spoken: _____

Spouse Information:

Religion/Church: _____

Cell Phone #: _____ Work Phone #: _____

Email Address: _____

Occupation/Employer: _____

Primary Language Spoken: _____

Welcome to the Cathedral of Saints Peter and Paul!