Christ the King Catholic Church Registration Form *Faith Mag.*_____ *OSV #*_____

Head of household Full Name: _____ **Today's Date:** _____

Address: _____ **Apt #:** ____ **Wife's Maiden Name(if applicable)**_____

City: _____ **ZIP Code:** _____ **Home Phone:** _____ **Unlisted?** Yes / No

May we publish your home phone number in the parish phone directory? Yes / No **Email?** Yes/No **Address?** Yes/No

E-mail (include addresses for teens, work, etc. if desired): _____

Do you wish to receive contribution envelopes? *(Contributions with your name will be credited to you even without envelopes. Envelopes may take up to two months to begin arriving, and will be in the name of the head of household or couple unless otherwise specified.)* **Yes/No**
I/We prefer electronic fund transfer ___ (You will be contacted with more information.)

Please take as much space as you need to list your and your family members full information.

				Please enter FULL date							
First Name	**Middle Name (important)**	**Last Name**	**Gender (M/F)**	**Birth mm/dd/yy**	**Baptism**	**First Confession** (no date required)	**First Communion**	**Confirmation**	**Marriage mm/dd/yy**	**Occupation or Grade in School**	**Work Phone or School Name**

_____ **Comments:** _____