

St. John & Paul II

CATHOLIC PARISH

3110 17 Mile Road | Cedar Springs, MI 49319 | 616.696.3904 | jp2-mqa.org

PARISH REGISTRATION FORM

Date: ____/____/____

Family Information

Family Last Name _____ Home Phone _____

2nd Language Spoken in Home _____

Address _____ City _____ Zip _____

Mailing Address (if different) _____

Marital Status _____ Wedding Anniversary _____

Mass Time Preference: **Saturday** 4:00pm **Sunday** 8:30am 10:30am

Head of Household

Mr. Mrs. Miss Ms.

First Name _____ Middle _____ Maiden _____ DOB _____

Religion _____ Baptized Yes No Baptismal Anniversary _____

Occupation _____ Work Phone _____

Email _____ Cell Phone _____

Hobbies _____

Preferred Communication Method: email Phone Call Text Mail

Spouse

Mr. Mrs. Miss Ms.

First Name _____ Middle _____ Maiden _____ DOB _____

Religion _____ Baptized Yes No Baptismal Anniversary _____

Occupation _____ Work Phone _____

Email _____ Cell Phone _____

Hobbies _____

Preferred Communication Method: email Phone Call Text Mail

Do you use online giving? Yes No

Do you need envelopes mailed if you use online giving? Yes No

Is there anyone who is handicapped or has special needs that lives at this address? _____

Explain briefly: _____

Please list children on the reverse side of this form (anyone over the age of 18 should register separately)

Seasonal Information

Winter Address _____

Months you are away _____ Do you wish to receive parish mailings?

