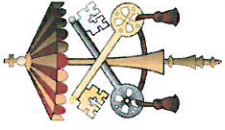


BASILICA OF THE CO-CATHEDRAL OF THE SACRED HEART PARISH REGISTRATION FORM—Please include ALL CHILDREN living at home



Family Name: _____ Home Phone: _____ Unlisted? yes no
 Title: Mr. Mrs. Ms. Miss Dr. Mr. Mrs. Dr. & Mrs. Dr. & Dr. Other
 Address of Residence: _____ City: _____ WV Zip: _____
 Mailing Address (if different): _____ City: _____ WV Zip: _____
 Marital Status: Married Single Widower Separated Divorced

	Head	Spouse	Young Adult /Child	Young Adult/Child	Young Adult/Child
Name & Middle Initial	_____	_____	_____	_____	_____
Last Name (if different)	_____	_____	_____	_____	_____
Catholic	_____	_____	_____	_____	_____
Occupation / student	_____	_____	_____	_____	_____
Place of Employ/School/College	_____	_____	_____	_____	_____
Business Phone	_____	_____	_____	_____	_____
Cell Phone	_____	_____	_____	_____	_____
Grade currently attending	_____	_____	_____	_____	_____
Gender	_____	_____	_____	_____	_____
Date of Birth	_____	_____	_____	_____	_____
Catholic Sacraments Received	Bapt Pen 1st C Conf / / / /	Bapt Pen 1st C Conf / / / /	Bapt Pen 1st C Conf / / / /	Bapt Pen 1st C Conf / / / /	Bapt Pen 1st C Conf / / / /
Mass-Occas/Infreq/Freq/Reg	_____	_____	_____	_____	_____
Married by a Catholic Priest	Y o N	Date of Marriage / /	_____	_____	_____
E-Mail (His)	_____	_____	_____	_____	_____
E-Mail (Hers)	_____	_____	_____	_____	_____

I am interested in information about: Parish K of C Becoming a Catholic Other
 COMMENTS: _____