## Welcome to the Church of Saint Charles

Please complete this form as fully as possible. The following information will be treated as confidential.

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Date:		
Title (circle one): Mr. & Mrs. Mr. Mrs. Ms. Miss	Dr.	
Last Name:		
Address:	_City/State:	Zip:
Primary phone: () Email ac	ddress:	
How would you like your correspondence addressed?		
Marital Status (circle one): Single / Consecrated / Engage	ged / Married / Widowed / An	nulled / Separated
If married, Church of Marriage:	Marriage	Date:
Previous Parish:		
May we list your name in the church bulletin as a new member	ber of our parish? Yes / No	
Would you like a free subscription to The Catholic Spirit (our	Archdiocesan newspaper)? Yes	/ No

Child #2 Child #3 Child #4 Adult #1 Adult #2 Child #1 First Name Birthdate Gender Religion Occupation School Attending **Current Grade** Baptism (Y/N) Church & City of Baptism Communion (Y/N) Confirmation (Y/N) Volunteer Interests