

ST. CATHERINE - NEW FAMILY REGISTRATION

(Only New Families Need Fill Out This Form)

540 3RD AVENUE NE
VALLEY CITY, ND 58072

701-845-1453 (School Office)

701-845-1453 (Church Office)

701-845-0556 (Fax)

Family Name _____			
Address _____		City _____	State _____ Zip _____
Home Phone _____		Email _____	

Adult Information

Husband Name (First, Middle, Last) _____

Birth Date _____ City/State _____

Baptism Date _____ Church/City/State _____

Confirmation Date _____ Church/City/State _____

Marital Status: Single Widowed Divorced Married (Date, Church, City) _____

Employer _____ Occupation _____

Work Phone _____ Personal Cell _____ Personal Email _____

Wife Name (First, Middle, Last) _____ (Maiden Name) _____

Birth Date _____ City/State _____

Baptism Date _____ Church/City/State _____

Confirmation Date _____ Church/City/State _____

Marital Status: Single Widowed Divorced Married (Date, Church, City) _____

Employer _____ Occupation _____

Work Phone _____ Personal Cell _____ Personal Email _____

Children Information

Name (First, Middle, Last) _____

Birth Date _____ Church/City/State _____

Baptism Date _____ Church/City/State _____

Confirmation Date _____ Church/City/State _____

School Attending _____ Current Grade _____

Name (First, Middle, Last) _____

Birth Date _____ Church/City/State _____

Baptism Date _____ Church/City/State _____

Confirmation Date _____ Church/City/State _____

School Attending _____ Current Grade _____

Name (First, Middle, Last) _____

Birth Date _____ Church/City/State _____

Baptism Date _____ Church/City/State _____

Confirmation Date _____ Church/City/State _____

School Attending _____ Current Grade _____

Name (First, Middle, Last) _____

Birth Date _____ Church/City/State _____

Baptism Date _____ Church/City/State _____

Confirmation Date _____ Church/City/State _____

School Attending _____ Current Grade _____