

Person Record
St. John's St. Joseph St. James
8/9/2011

Register # _____
Envelope #: _____
Mbr. Code/Status: _____

Title	First	Middle	Last	Suffix
Preferred Name: _____		Maiden/Birth Name: _____		
Birthrate: ____/____/____		Sex: M F	Member?/Since: Y N ____/____/____	
Place of Birth: _____		Baptized?: Y N ____/____/____		
Ethnic Origin: _____		Confirmed?: Y N ____/____/____		
Church Background: _____		First Communion?: Y N ____/____/____		
Marital Status: _____				
Spouse Name: _____		Wedding Date ____/____/____		# of Children _____
Household Name: _____				
Family Relationship: _____		Circle one: Head Spouse Child Other		
Employer/Address _____				
Work Phone: _____		Listed?: Y N Shift: _____		
Occupation: _____		Military Status: _____		
Current School: _____		Education Level: _____		
Current Grade: _____		Sun. Sch. Grade: _____		
Cell Phone: _____		Listed?: Y N		
E-Mail Address/Type: _____ / Home Personal Work				
Current Address _____		Other Address: When ____/____/____ - ____/____/____		
_____		_____		
_____		_____		
Phone: _____		Listed?: Y N	Phone: _____	
		Listed?: Y N		

I am interested in the following activities:

I have the following skills/talents that I would like to share:

I have the following training (include date completed):
