St. Mary's Catholic Church Newport

11555 St. Mary's Church Road, Charlotte Hall, MD 20622 301-997-3611

stmarycatholicchurchnewportmd@gmail.com

Parishioner Registration Form

Family Last Name:	· ·						
Mailing Address: _							
Street Address (if c	lifferent)						
Home Phone Number:		Cell Phone Number:		E-mail:			
			FAMILY IN	FORMATION			
Parish Envelope #:							
	Daily						
Regular Mass Atte	ndance : (Sat. 5	5:00 p.m.)(Sun. 8:00 a.m.)	(Sun. 10:30 a.r	n.)		
	_	T	_		T	_	_
	LAST NAME	FIRST & MIDDLE	M/F	Date of Birth	Date of Baptism &	Date of First	Date of Confirmation &
		NAME		(MM/DD/YY)	Church (if known)	Communion & Church (if known)	Church (if known)
Head of Household						(= ==== ,=)	
Spouse							
Marital Status:	Single	Married	Divorced	Widow/Widower			
			CHILDREN	N (UNDER 21)			
LAST NAME	FIRST & MIDDLE NAME	M/F	Date of Birth	Mass Attendance Y/N	Date of Baptism &	Date of First	Date of Confirmation
			MM/DD/Y Y		Church (if known)	Communion & Church (if known)	& Church (if known)
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