

SAINT KATHARINE DREXEL PARISH CENSUS CARD

REGISTRATION DATE _____

MARRIAGE INFORMATION

PARISH/ENVELOPE # _____ DIO # _____ AREA # _____

VALID MARRIAGE

FAMILY NAME _____

Date of Marriage _____

ADDRESS _____

Name & Address of Church _____

ADDRESS _____

INVALID MARRIAGE

CITY/STATE _____ ZIP _____ - _____

Date of Marriage _____

TELEPHONE (home) _____ (His cell) _____

Place of Marriage _____

(Her Cell) _____ e-mail address _____

Date of Validation of Marriage _____

NAME OF HOUSING DEVELOPMENT _____

Name & Address of Church of Validation _____

FIRST NAME	DATE OF BIRTH	PLACE OF BIRTH	RELIGION	Date of BAPTISM	Date of FIRST HOLY COMMUNION	Date of CONFIRMATION	SCHOOL	GRADE	MISC.
Husband/Head of Household/Male									
Wife/Head of Household (Female) (Maiden Name)									

HUSBAND'S WORK _____

WORK PHONE NUMBER _____

WIFE'S WORK _____

WORK PHONE NUMBER _____

INTERESTED IN HELPING WITH PARISH ACTIVITIES, SUCH AS (Husband) _____

(Wife) _____

REMARKS

(h drive - new parishioner registration)