

FORM TO SIGN UP IN THE PARISH

Instructions: Print out form - fill it in and

Mail to: **St. Rocco Church**
927 Atwood Ave
Johnston, RI 02919

Date: _____

Family Name (Last) _____ First _____ Spouse _____

Title (circle one): M/M Mr. Mrs. Miss Dr/Mrs.

Address: _____ City _____ Zip _____

Marital Status: _____ Phone: _____

Cell Phone: _____ Email Address: _____

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	Head	Spouse	child	child
First Name:	_____	_____	_____	_____
Last Name: (if different)	_____	_____	_____	_____
Religion	_____	_____	_____	_____
Occupation	_____	_____	_____	_____
Highest Grade	_____	_____	_____	_____
Date of Birth	_____	_____	_____	_____
Baptism	_____	_____	_____	_____
First Comm	_____	_____	_____	_____
Confirmation	_____	_____	_____	_____
Marriage	_____	_____	_____	_____
Date of Birth	___/___/___	___/___/___	___/___/___	___/___/___
Baptism	___/___/___	___/___/___	___/___/___	___/___/___
First Communion	___/___/___	___/___/___	___/___/___	___/___/___
Confirmation	___/___/___	___/___/___	___/___/___	___/___/___
Marriage	___/___/___	_____	___/___/___	___/___/___

child

___/___/___

___/___/___

___/___/___

___/___/___

___/___/___

