

**Registration for: Saint Vincent Basilica Parish**

Today's Date: \_\_\_\_\_

Would you like to receive the Catholic Accent?

Are you interested in online giving?

**Saint Vincent Basilica Parish**

300 Fraser Purchase Road

Latrobe, PA 15650

Phone (724) 539-8629 ext. 11

Website: [www.basilicaparishstv.org](http://www.basilicaparishstv.org)

Registration Email Address:

[stacie.ridilla@stvincent.edu](mailto:stacie.ridilla@stvincent.edu)

For office use only

Parish ID: \_\_\_\_\_

Registration Received: \_\_\_\_\_

Entered in Parish Software: \_\_\_\_\_

Sent to Diocese: \_\_\_\_\_

New Parishioner Letter: \_\_\_\_\_

Bulletin: \_\_\_\_\_

WeShare: \_\_\_\_\_

Mr.          Mrs.          Ms.          Miss.          Mr. & Mrs.

**YOUR INFORMATION:**

**SPOUSE INFORMATION:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_ Unlisted: Yes      No

Preferred Phone: \_\_\_\_\_ Unlisted: Yes      No

Alternate Phone: \_\_\_\_\_ Unlisted: Yes      No

Alternate Phone: \_\_\_\_\_ Unlisted: Yes      No

Employer & Occupation: \_\_\_\_\_

Employer & Occupation: \_\_\_\_\_

Name Head(s) of Household	Gender M/F	DOB	Religion	Baptism Y/N	Communion Y/N	Confirmation Y/N	Notes/Comments
1.							
2.							

Marital Status:  Single  Married  Separated  Divorced  Widowed  Annulled      Married in Catholic Church?  Yes  No

Name of Others in Household (children over 23 are suggested to register separately.)	Gender M/F	DOB	Religion	Baptism Y/N	Communion Y/N	Confirmation Y/N	Child's High School Graduation Year
1.							
2.							
3.							
4.							
5.							
6.							

**WOULD YOU LIKE INFORMATION REGARDING:**

Baptism      1st Communion      Confirmation      Marriage      Religious Education  
RCIA (Rite of Christian Initiation for Adults)

General information/areas interested in volunteering: