## Saint Vincent Basilica Parish For office use only **Registration for: Saint Vincent Basilica Parish** Parish ID: 300 Fraser Purchase Road Registration Received: Latrobe, PA 15650 Today's Date: Phone (724) 539-8629 ext. 11 Entered in Parish Software: \_\_\_\_\_ Would vou like to receive the Catholic Accent? Sent to Diocese: Website: www.basilicaparishstv.org Registration Email Address: New Parishioner Letter: Are you interested in online giving? stacie.ridilla@stvincent.edu Bulletin: WeShare: Mr. & Mrs. Miss. Mr. Mrs. Ms SPOUSE INFORMATION: YOUR INFORMATION: Name: Street Address: \_\_\_\_\_ Street Address: \_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ City: \_\_\_\_ State: \_\_\_ Zip: \_\_\_ State: \_\_\_ Zip: \_\_\_\_ State: \_\_\_ Zip: \_\_\_ State: \_\_\_ State: \_\_\_ Zip: \_\_\_ State: \_\_\_ Zip: \_\_\_ State: \_\_\_ State: \_\_\_ Zip: \_\_\_ State: Email: \_\_\_\_\_ Email: \_\_\_\_ Preferred Phone: \_\_\_\_\_ Unlisted: Yes No Preferred Phone: Unlisted: Yes No Alternate Phone: Unlisted: Yes Alternate Phone: Unlisted: Yes Employer & Occupation: Employer & Occupation: Name Head(s) of Household **Baptism** Gender Communion Confirmation **Notes/Comments** DOB Religion M/F Y/NY/NY/N 1. Marital Status: Single Married Separated Divorced Widowed Annulled Married in Catholic Church? Yes No Gender Name of Others in Household **Baptism** Communion Confirmation DOB **High School** Religion M/F Y/N Y/N Y/N (children over 23 are suggested **Graduation Year** to register separately.)

WOULD YOU LIKE INFORMATION REGARDING:

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

Marriage

**Religious Education** 

General information/areas interested in volunteering: