



**WELCOME TO ST. MARTIN PARISH!  
REGISTRATION INFORMATION**

Please return to: St. Martin Church: 7148 St. Martins Blvd, Jefferson City, MO 65109  
([parish@stmartinjc.org](mailto:parish@stmartinjc.org))

**FAMILY INFORMATION**

LAST NAME – HEAD OF HOUSE _____	Suffix (circle if used) Jr., Sr., Other ____
FIRST NAME – HEAD OF HOUSE _____	Title – (circle one) Mr. & Mrs., Mr., Mrs.,
FIRST NAME –SPOUSE _____	Ms., Dr., Other _____
NAME AS APPEARS ON MAIL: _____	(example: Mr. & Mrs. John Jones
STREET ADDRESS: _____	Mailing Address (if different) _____
CITY, STATE: _____	_____
ZIP CODE: _____	
PRIMARY PHONE: _____	EMAIL: _____
___ I would like to receive Sunday offering envelopes?	
___ I do not wish to receive Sunday offering envelopes.	Previous Parish: _____
(I will give electronically)	

**Please complete one-member registration for each person in the family (including Head of House). If you have more than four (4) members in your family, please use a blank piece of paper or pick up additional forms in the back of church. Indicate if the member is not living with you (i.e. away at college).**

**1. MEMBER REGISTRATION:** (FIRST, MIDDLE, LAST) \_\_\_\_\_

TITLE: \_\_\_\_\_ Suffix (circle if used) Jr., Sr., Other \_\_\_\_ MEMBER NICKNAME: \_\_\_\_\_

MAIDEN NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ GENDER: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ CARRIER: \_\_\_\_\_

RELATIONSHIP (Head of Household): \_\_\_\_\_

RELIGION: \_\_\_\_\_

Marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_ Location: \_\_\_\_\_

Marriage Blessed by Catholic Church:   yes   no

Status:  Married    Separated  
 Divorced    Widowed    Single

**MEMBER REGISTRATION:** (FIRST, MIDDLE, LAST) \_\_\_\_\_

2. TITLE: \_\_\_\_\_ Suffix (circle if used) Jr., Sr., Other \_\_\_\_ MEMBER NICKNAME: \_\_\_\_\_  
\_\_\_\_\_

MAIDEN NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ GENDER: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ CARRIER: \_\_\_\_\_

RELATIONSHIP (to Head of Household): \_\_\_\_\_ SCHOOL: \_\_\_\_\_ PRESENT GRADE: \_\_\_\_\_

RELIGION: \_\_\_\_\_ Status:  Married  Separated  
 Divorced  Widowed  Single

Marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_ Location: \_\_\_\_\_

Marriage Blessed by Catholic Church: yes no

**3. MEMBER REGISTRATION:** (FIRST, MIDDLE, LAST) \_\_\_\_\_

TITLE: \_\_\_\_\_ Suffix (circle if used) Jr., Sr., Other \_\_\_\_ MEMBER NICKNAME: \_\_\_\_\_

MAIDEN NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ GENDER: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ CARRIER: \_\_\_\_\_

RELATIONSHIP (to Head of Household): \_\_\_\_\_ SCHOOL: \_\_\_\_\_ PRESENT GRADE: \_\_\_\_\_

RELIGION: \_\_\_\_\_ Status:  Married  Separated  
 Divorced  Widowed  Single

**4. MEMBER REGISTRATION:** (FIRST, MIDDLE, LAST) \_\_\_\_\_

TITLE: \_\_\_\_\_ Suffix (circle if used) Jr., Sr., Other \_\_\_\_ MEMBER NICKNAME: \_\_\_\_\_

MAIDEN NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ GENDER: \_\_\_\_\_

EMAIL: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ CARRIER: \_\_\_\_\_

RELATIONSHIP (to Head of Household): \_\_\_\_\_ SCHOOL: \_\_\_\_\_ PRESENT GRADE: \_\_\_\_\_

RELIGION: \_\_\_\_\_ Status:  Married  Separated  
 Divorced  Widowed  Single