

For office use				
PS	WL	Env	PM	MC

ST. CHARLES CATHOLIC CHURCH REGISTRATION FORM

DATE _____

Family Last Name _____
 Street Address _____
 PO Box _____
 City, State, Zip _____
 Telephone _____
 E-mail Address _____

SECOND ADDRESS
 Dates - From (month - month) _____ - _____
 Street Address _____
 PO Box _____
 City, State, Zip _____
 Telephone _____

Are you a permanent resident? Yes No (if no, please provide second address above)
 Are you or a family member homebound? Yes No
 Marital Status Single Married Divorced Separated Widowed
 Were you married by a: (circle one) Catholic Priest Minister Justice of the Peace

Family Member Info (Full Names)	Religion	Birth Date	Baptism	Confirmation	Marriage Date	Occupation or School	Committees or Ministries you are interested in joining
Husband or Head of Household		____-____-____	Yes No	Yes No	____-____-____		
Spouse - <i>Indicate Maiden Name</i>		____-____-____	Yes No	Yes No			
Children <i>Living at Home</i> (indicate M/F)							
1)		____-____-____	Yes No	Yes No			
2)		____-____-____	Yes No	Yes No			
3)		____-____-____	Yes No	Yes No			
4)		____-____-____	Yes No	Yes No			

*St. Charles Parish includes the towns of: Meredith - Center Harbor - Moultonborough - Sandwich.

*Mail this form to: **St. Charles Church, PO Box 237, Meredith, NH 03253** - or you may drop it off at the office or put it in the collection basket at Mass

Faith Formation is offered for students in grades K-10. Call 279-8691, for registration information.