



Risen Christ
Catholic Community
A Parish of the Diocese of Boise

Registration Form

Print Last Name	
Home Address	
City & Zip	

Home Phone #	Unlisted? Yes No

Cell Phone #	_____
E-Mail Address	_____

Marital Status (circle one)
Single Separated
Divorced Widowed
Married>>> _____ M/D/Y

To help us identify where you live, please list the nearest crossstreets _____

Male and Female Head of Household								
First Name & Middle Initial (PLEASE PRINT) ↓ ↓ ↓	Birthdate M/D/Y	Religion (CIRCLE ONE)	Confirmed Catholic (CIRCLE ONE)	Education (MAJOR SUBJECTS OF STUDY)	Employed outside the home (CIRCLE ONE)	Occupation/Type of Work (NOW OR WHEN EMPLOYED)	Work Phone (IF EMPLOYED)	Hobbies and Skills
MALE HEAD OF HOUSEHOLD		CATHOLIC OTHER NOT	YES NO		YES NO RETIRED			
FEMALE HEAD OF HOUSEHOLD		CATHOLIC OTHER NOT	YES NO		YES NO RETIRED			

Children and Other Adults Living in this Household						
First Name & Middle Initial (PLEASE PRINT)	Sex (CIRCLE ONE)	Birthday M/D/Y	Grade of Child	Baptized (CIRCLE ONE)	First Communion (CIRCLE ONE)	Confirmed Catholic (CIRCLE ONE)
	MALE FEMALE			CATHOLIC OTHER NOT	YES NO	YES NO
	MALE FEMALE			CATHOLIC OTHER NOT	YES NO	YES NO
	MALE FEMALE			CATHOLIC OTHER NOT	YES NO	YES NO
	MALE FEMALE			CATHOLIC OTHER NOT	YES NO	YES NO
	MALE FEMALE			CATHOLIC OTHER NOT	YES NO	YES NO

Do you have your own business or professional practice?
NAME OF BUSINESS OR PROFESSIONAL PRACTICE _____
TYPE OF BUSINESS OR PROFESSIONAL PRACTICE _____
ADDRESS _____
CITY _____ ZIP _____
PHONE _____

Special needs, comments or information. you wish to bring to our attention.