Envelope #   ***St. Katharine Drexel Mission***   *Registration Form*

4100 Mill Creek Road – Haymarket, VA 20169 – Phone: (703) 754-8444 Fax: (703) 754-7443   **Date:**

Last Name: _____   **Title:**   Mr./Mrs.   Mr.   Mrs.   Ms.   Dr./Mrs.   Dr.   Address: _____

City: _____   State, Zip Subdivision: _____   Home phone: _____

If married, were you married in the Catholic Church by a Priest or Deacon: Yes / No   Date of Marriage: _____   Church of Marriage: _____

Wife's email: _____   Husband's email: _____   Primary language: _____

First Name	Nick Name	DOB	Religion	Occupation	Employer	Phone Numbers	Sacraments	Marital Status
Husband / Single Male		/ / MM DD YY				Work: Cell:	____Baptism ____Confession ____Communion ____Confirmation	M / S / W / D
Wife / Single Female	**nick name and maiden name**	/ / MM DD YY				Work: Cell:	____Baptism ____Confession ____Communion ____Confirmation	M / S / W / D

Children at home	Nick Name	DOB	Gender	Religion	Education		Sacraments	
		/ / MM DD YY			____Public School ____Catholic School ____Private School ____Homeschool		____Baptism ____Communion ____Confession ____Confirmation	
		/ / MM DD YY			____Public School ____Catholic School ____Private School ____Homeschool		____Baptism ____Communion ____Confession ____Confirmation	
		/ / MM DD YY			____Public School ____Catholic School ____Private School ____Homeschool		____Baptism ____Communion ____Confession ____Confirmation	
		/ / MM DD YY			____Public School ____Catholic School ____Private School ____Homeschool		____Baptism ____Communion ____Confession ____Confirmation	
		/ / MM DD YY			____Public School ____Catholic School ____Private School ____Homeschool		____Baptism ____Communion ____Confession ____Confirmation	
		/ / MM DD YY			____Public School ____Catholic School ____Private School ____Homeschool		____Baptism ____Communion ____Confession ____Confirmation	

Others Residing at Address	Nick Name	DOB	Occupation	Cell Phone	Sacraments	Marital Status	Relationship to Household
		/ / MM DD YY			____Baptism ____Communion ____Confession ____Confirmation	M / S / W / D	
		/ / MM DD YY			____Baptism ____Communion ____Confession ____Confirmation	M / S / W / D	

- Would you like to be contacted about any one of the following: Baptism, First Communion, Confirmation, RCIA, getting your marriage blessed in the Catholic Church: _____
- To be helpful with Church contributions, please choose one of the following: _____ Offertory Envelopes _____ ParishSOFT (electronic fund transfer)

If you choose to use ParishSOFT, please be sure to fill in a ParishSOFT form, or log on to ParishSOFT's website. If you choose to make contribution by the use of Offering Envelopes, please allow 3-4 weeks to process your registration and for your envelopes to arrive.