

St. Mary – St. Catherine of Siena Parish
Parish Registration
 46 Winthrop Street, Charlestown MA 02129 (617) 242-4664

Date: _____

Would like to receive Offertory Envelopes

Mailing Name:

Home Phone: _____

Last Name: _____

Email: _____

First Name(s) _____

Address: _____

Permission to publish phone, address, email in Parish

Apt #: _____

Publish Phone? Y N

Publish Address? Y N

Publish Email? Y N

City: _____ State: _____

Zip: _____

Marital Status: _____

Anniversary Date: _____

Wedding Church/City: _____

Name: _____

DOB: _____

Sacramental Info: Baptized? Y N Catholic? Y N
 Other denomination? _____

Baptized? Y N Catholic? Y N
 Other denomination? _____

Reconcil? First Eucharist? Confirmed?
 Y N Y N Y N

Reconcil? First Eucharist? Confirmed?
 Y N Y N Y N

Occupation: _____

Work Phone: _____

Email: _____

Children's Information

Child: _____ Birthdate Sex Grade

Special Needs: _____

Check if Sacrament Received. Add Date if known. Baptism Catholic? Eucharist Reconciliation Confirmation

Check if Sacrament Received. Add Date if known. Baptism Catholic? Eucharist Reconciliation Confirmation

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For more information, or to download registration form online, please visit www.charlestown.cc

Please return to parish office, 46 Winthrop Street

Any questions, please call the parish office at 242-4664

Would you like a member of the parish staff to contact you about anything? Y N