Membership Registration Information St. Michael Parish (715)799-3811 PO Box 610, Keshena, WI 54135 stmichaels@livingwaterslivingfaith.org

Family Last Name (s)		Date	Office Only	
Address			Diocean ID	
City		State	Zip Code	
Primary Phone #	Emergency Contact Name and Phone #	Relationship		
Family email		Direct deposit Yes / No	Envelopes Yes / No	
Previous Parish/church attended		City	State	
Marital Status (circle one): Single Engaged Sacramental Marriage				
Non-Sacramental Marriage Widowed Separated Divorced				

Primary Information

Last Name	First Name	Middle Initial		Maiden Name
Individual Email	Individual Cell #		Religion	
If this person is not Catholic, does this person want to be considered one: Yes No	lered a member of St.	Michael Pa	arish?	
Occupation Employer			Business	Phone #
Date of Birth	Special Need			
Baptism Circle one: Yes No Unknown	Date		Church/City	
1st Communion Circle one: Yes No Unknown	Date		Church/City	
Confirmation Circle one: Yes No Unknown	Date		Church/City	
Marriage Circle one: Yes No Unknown	Date		Church/City	
Reconciliation Circle one: Yes No Unknown	Date		Church/City	

Spouse Information

Last Name	First Name	Middle In	nitial	Maiden Name
Individual Email	Individual Cell #		Religion	
If this person is not Catholic, does this person want to be considered a member of St. Michael Parish? Circle one: Yes No				
Occupation	Employer		Business Phone #	
Date of Birth	Special Need			
Baptism Circle one: Yes No Unknown	Date		Church/City	
1st Communion Circle one: Yes No Unknown	Date		Church/City	
Confirmation Circle one: Yes No Unknown	Date		Church/City	
Marriage Circle one: Yes No Unknown	Date Church/City		Sity	
Reconciliation Circle one: Yes No Unknown	Date Church/City		lity	

Family Member(s) Information Please fill out one section for each family member.

Last Name	First Name	Middle Initial		Maiden Name
Individual Email	Individual Cell #		Religion	
If this person is not Catholic, does this person want to be considered a member of St. Michael Parish? Circle one: Yes No				
Occupation	Employer		Business Phone #	
Date of Birth	Special Need			
Baptism Circle one: Yes No Unknown	Date		Church/City	
1st Communion Circle one: Yes No Unknown	Date		Church/City	
Confirmation Circle one: Yes No Unknown	Date		Church/City	
Marriage Circle one: Yes No Unknown	Date Church/City		ity	
Reconciliation Circle one: Yes No Unknown	Date Church/City		ity	

Family Member(s) Information

Last Name	First Name	Middle Initial		Maiden Name	
Individual Email	Individual Cell #		Religion		
If this person is not Catholic, does this person want to be considered a member of St. Michael Parish? Circle one: Yes No					
Occupation Employer			Business Phone #		
Date of Birth	Special Need				
Baptism Circle one: Yes No Unknown	Date Church/Ci		Sity		
1st Communion Circle one: Yes No Unknown	Date		Church/City		
Confirmation Circle one: Yes No Unknown	Date		Church/City		
Marriage Circle one: Yes No Unknown	Date Church/City		lity		
Reconciliation Circle one: Yes No Unknown	Date Church/City		lity		

Family Member(s) Information

Last Name	First Name	Middle Initial		Maiden Name	
Individual Email	Individual Cell #		Religion		
If this person is not Catholic, does this person want to be considered a member of St. Michael Parish? Circle one: Yes No					
Occupation	Employer		Business Phone #		
Date of Birth	Special Need				
Baptism Circle one: Yes No Unknown	Date		Church/City		
1st Communion Circle one: Yes No Unknown	Date		Church/City		
Confirmation Circle one: Yes No Unknown	Date		Church/City		
Marriage Circle one: Yes No Unknown	Date Chui		Church/C	lity	
Reconciliation Circle one: Yes No Unknown	Date Church/City		lity		

Family Member(s) Information

Last Name	First Name	Middle In	itial	Maiden Name	
Individual Email	Individual Cell #		Religion		
If this person is not Catholic, does this person want to be considered a member of St. Michael Parish? Circle one: Yes No					
Occupation	Employer		Business	Business Phone #	
Date of Birth	Special Need				
Baptism Circle one: Yes No Unknown	Date		Church/City		
1st Communion Circle one: Yes No Unknown	Date		Church/City		
Confirmation Circle one: Yes No Unknown	Date		Church/City		
Marriage Circle one: Yes No Unknown	Date Church/City		lity		
Reconciliation Circle one: Yes No Unknown	Date Church/City		lity		

Comments: