



St. John Neumann Catholic Church
 4030 Pilot Knob Road
 Eagan, MN 55122
 651-454-2079

Personal Membership Information

CONFIDENTIAL — FOR OFFICE USE ONLY

FOR OFFICE USE ONLY:

ENVELOPE NUMBER

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TODAY'S DATE	LAST NAME	HOUSEHOLD PHONE

ADDRESS	CITY	ZIP

HOUSEHOLD E-MAIL ADDRESS

FIRST NAME (include last name if different from above)	GENDER M/F	BIRTHDATE MMDDYY	RELIGION	MARITAL STATUS	DATE OF MARRIAGE	Name of Church in which you were married _____ _____ City _____ State _____

SACRAMENTS RECEIVED BAPTISM 1ST COMM. CONFESS. CONFIRM.	CELL PHONE	OCCUPATION
CIRCLE Y N	CIRCLE Y N	CIRCLE Y N
CIRCLE Y N	CIRCLE Y N	E-MAIL
CIRCLE Y N	CIRCLE Y N	EMPLOYER

FIRST NAME (include last name if different from above)	GENDER M/F	BIRTHDATE MMDDYY	RELIGION	MARITAL STATUS	DATE OF MARRIAGE	Name of Church in which you were married _____ _____ City _____ State _____

SACRAMENTS RECEIVED BAPTISM 1ST COMM. CONFESS. CONFIRM.	CELL PHONE	OCCUPATION
CIRCLE Y N	CIRCLE Y N	CIRCLE Y N
CIRCLE Y N	CIRCLE Y N	E-MAIL
CIRCLE Y N	CIRCLE Y N	EMPLOYER

CHILDREN OR DEPENDENTS IN RESIDENCE (include last name if different from above)	GENDER M/F	BIRTHDATE MMDDYY	RELIGION	SACRAMENTS RECEIVED				SCHOOL GRADE, NAME & LOCATION
				BAPTISM	1ST COMM.	CONFESS.	CONFIRM.	
				CIRCLE Y N	CIRCLE Y N	CIRCLE Y N	CIRCLE Y N	
				Y N	Y N	Y N	Y N	
				Y N	Y N	Y N	Y N	
				Y N	Y N	Y N	Y N	

Your name and phone number will be given to parish volunteers who will call to welcome you to St. John Neumann in the next couple months.

Check here if you would prefer we did **not** share your contact information with our parish welcoming committee.

Check here if you are interested in learning more about the various volunteer opportunities at St. John Neumann.

Notes/Questions -

St. John Neumann will not share your registration information with outside institutions.

OFFICE USE ONLY	ENTERED DATE		WELCOME LETTER SENT	
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