

Today's date: _____

Saint Andrew Parish Registration

3501 North Kings Highway, Suite 102 • Myrtle Beach, South Carolina 29577 • Phone 843-448-5930 • Fax 843-448-3947

Last Name: _____ Name to appear for mailings: _____

I am / We are:

Single Engaged Married Separated Divorced Widowed

Local address: _____

City/State/Zip: _____

Permanent resident Season resident (months here) From: _____ To: _____

Permanent address (if different from local): _____

City/State/Zip: _____

Parish moving from: _____

City/State/Zip: _____

Preferred Mass Attendance:

Sat (4:30p) Sat (6:15p) Sun (7:30a) Sun (9:15a) Sun (11a) Sun (5p) Sun (7p)

HEAD OF HOUSEHOLD

SPOUSE

First Name _____

Middle Initial _____

Date of Birth /Sex: _____ M F

Email: _____

Church of Baptism: _____

City/State of Baptism _____

Date of Confirmation: _____

Married Catholic/By: Y N By: Priest Deacon Other

Cell Number: _____

Work Number: _____

Grade/Degree: _____

Language: _____

Religion: _____

Handicap: _____

Occupation: _____

Place of Employment: _____

Homebound Disabled (nature of disability): _____

CHILDREN LIVING AT HOME

Full Name	Sex		Date of Birth	Religion
	M	F		

FOR OFFICE USE ONLY: LAST NAME: _____

ENV # _____

DATE REC'D _____

DATE POSTED _____



