



New Parishioner Registration Form

211 East Division Street; PO Box 86 ☙ River Falls, WI 54022

Phone: 715.425.1870 ☙ Fax: 715.425.1871 ☙ Email: parishadmin@stbparish.com

Office Hours: Monday – Friday 9:00 am – 4:00 pm

Family Last Name	
Street Address	
City, State, Zip	
Primary Phone Number	
Primary Email Address	
Previous Parish	
We will not distribute your phone number or email address	

Welcome to St. Bridget!

We are honored you have chosen to journey with us. So that we may serve you better, please fill out this registration form clearly and completely and return to the church office. Please email, call or stop by the office with any questions.

Registrant Name	
First & Middle:	M F
Preferred Name:	
Date of Birth:	
Occupation:	
Race/Ethnicity: <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> African American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Unknown	
Religion:	
Marital Status: <input type="checkbox"/> Single; never married <input type="checkbox"/> Married - Both Catholic <input type="checkbox"/> Widowed <input type="checkbox"/> Married - Interfaith <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	
Baptized	<input type="checkbox"/> Yes <input type="checkbox"/> No
Church of Baptism	
City/State of Baptism	
First Communion	<input type="checkbox"/> Yes <input type="checkbox"/> No
Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No

Spouse Name (if applicable)	
First & Middle:	M F
Preferred Name:	
Date of Birth:	
Occupation:	
Race/Ethnicity: <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> African American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Unknown	
Religion:	
Marital Status: <input type="checkbox"/> Single; never married <input type="checkbox"/> Married - Both Catholic <input type="checkbox"/> Widowed <input type="checkbox"/> Married - Interfaith <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	
Baptized	<input type="checkbox"/> Yes <input type="checkbox"/> No
Church of Baptism	
City/State of Baptism	
First Communion	<input type="checkbox"/> Yes <input type="checkbox"/> No
Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No

Children Living at Home or in College (Please list additional children on the back of this form)							
First & Middle Name	Last Name (if different)	Gender	Date of Birth	Baptized	Church & City/State of Baptism	Comm.	Confirm.
		M / F	/ /	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
		M / F	/ /	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
		M / F	/ /	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
		M / F	/ /	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N

How would you like to support St. Bridget
<input type="checkbox"/> Electronic Contribution/ACH <input type="checkbox"/> Weekly Envelopes

Would you like to receive the Diocesan Catholic Herald?
<input type="checkbox"/> Yes <input type="checkbox"/> No
Please note: this publication does cost the parish \$20 if no payment is not sent by parishioner. It is also available online.

Would you like additional information about the following:
Parish School? <input type="checkbox"/> Yes: ___ PreK ___ K – 8 th Grade
Faith Formation? <input type="checkbox"/> Yes: ___ PreK ___ K – 5 th ___ MS ___ HS