

Divine Mercy Parish
 Divina Misericordia
 23 W. Chestnut Avenue
 Vineland, NJ 08360
 856-691-9181

Date: _____

Last Name: _____

Title: (Please circle one) Mr./Mrs., Mr., Mrs., Ms., Miss

Address: _____

Telephone: _____

Cell Phone: _____

Marital Status: (Please circle one) Married by Priest, Minister, Civil, Single, Divorced,
 Separated, Widow/Widower

Date of Marriage: _____

Church Attendance: (Please Circle one) Regular Occasional Seldom

Will use Church Envelopes: Yes / No

Family Information

	Head of Household	Spouse	Child 1	Child 2	Child 3	Child 4	Other
First Name							
Last Name (if different)							
Date of Birth							
Sex							
Religion							
Baptism	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Penance	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Communion	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Confirmation	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No

Would you be interested in being part of: Choir, Lectors, Eucharistic Ministers, Ushers, Altar Servers