## CHRIST THE KING PARISH REGISTRATION

FAMILY LAST NAME		_ ADDRESS		ZIP Re	gistration date:
(PLEASE PRINT)				How I/We will contribute to th	e Parish
MR. AND MRS. MI	R. MS. MISS			Please check one:	
PRIMARY FAMILY Phone:		Belongs to:		I/We will contribute through Online Giving. (Sign up at www.ctkpueblo.org)  I/We will contribute using Bill Pay through my/our Bank.	
PRIMARY FAMILY Email:		Belongs to:			
MARITAL STATUS:	MARRIED BY A PRIES MARRIED CIVILLY	T WIDOWED DIVORCED	SINGLE	•	th Contribution Envelopes:
FORMER PARISH	CITY		ST	Check one: Monthly Weekly	
MEMBER INFORMATION	ADULT	ADULT	CHILD AT HON	ME CHILD AT HOME	CHILD AT HOME
	ADULI	ADULI	CHILD AT HON	THE CHILD AT HOME	CHILD AT HOME
FIRST NAME					
LAST NAME					
GENDER	M F	M F	M F	M F	M F
ROLE: Husband, Wife, Son, Daughter, Single, etc.					
CELL#					
WORK #					
E-MAIL					
DATE OF BIRTH					
BAPTIZED - Y/N					
IST COMMUNION - Y/N					
IST PENANCE - Y/N					
CONFIRMED -Y/N					
SCHOOL (if applicable)					
GRADE (if applicable)					