St. James Catholic Church
Parish Office
124 N. Pacific Coast Highway
Redondo Beach, CA 90277
(310) 372-5228

Parish Office Use Only

PDS #:
Parish Zone:
Date Entered:

Confidential Parish Registration Form

Please Print All Information

Family Name:	Street Address:	Apt#:	P.O. Box:	City:	Zip:

Telephone Number: (unlisted Y or N)	Date Form Completed:

Enter First Name of Each Family Member (include children and maiden name if married)	Title 1=Mr 2=Mrs 3=Ms 4=Miss 5=Dr	Marital Status 1=Married 2=Single 3=Widow 4=Separated 5=Divorced 6=Other	Married in a Catholic Church (Y or N)	Religion (other than Catholic)	Other Language Spoken (other than English)	Occupation (use student if applicable)	Name of Employer or School	Business Telephone (include extension if applicable)	Highest Level of Education K=Elem. H=High School C=College G-Grad School	St. James Church Attendance 1=Daily 2=Weekly 3=Sometimes 4=None 5=Other Church	Date of Birth (--/--/--)	Baptized (Y or N)	First Communion (Y or N)	Confimation (Y or N)	Date Married (--/--/--)

Comments: _____

Our family would like weekly donation envelopes sent to our home: Yes or No (please circle your preference)