

St. Emeric Parish

1860 West 22nd Street, Cleveland, Ohio 44113

www.stemeric.com

Date _____

REGISTRATION FORM

| | | | |
|--------------------|--------------|------------------------|-----|
| Family (Last) Name | Home Address | State | ZIP |
| City | Home Phone | Alternate Phone Number | |

Family's Primary e-mail address

| Members of the Household | | | | |
|--------------------------|---------------|-----|----------------|----------------------------|
| Name | Date of Birth | M/F | First Language | Religion (if not Catholic) |
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Would you like to receive e-mail notices on church activities?

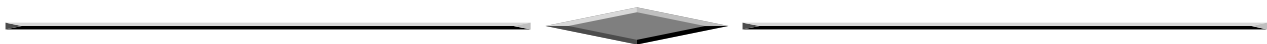
yes

no

Would you be willing to volunteer for parish activities?

yes

no



Do you have any special needs or situations that you wish to call to our attention? Please indicate below.