

St Peter Parish
695 Colorado Ave
Bridgeport, CT 06605

Family Information

Last Name _____
Family Email _____
Home Phone () - _____

Envelope Number _____
Mailing Name _____
Emergency Phone () - _____

Address Information

Address 1 _____
Address 2 _____
City _____ State _____ Zip/Postal _____

Publish Phone Publish Address Publish Email Receive Visits Receive Contributions Envelopes

Member Information

First Name _____	Nick Name _____	Status at Parish _____
Role _____	Gender M / F	
Date of Birth _____	MaidenName _____	
Email _____	Birth Place _____	
Ethnicity _____	Work Phone () - _____	
First Language _____	Cell Phone () - _____	
Special Needs _____	High School Grad Year _____	

Sacrament Information

<input type="checkbox"/> Catholic	<u> </u> / <u> </u> / <u> </u>	<input type="checkbox"/> Baptism	<u> </u> / <u> </u> / <u> </u>
<input type="checkbox"/> Reconciliation Prep	<u> </u> / <u> </u> / <u> </u>	Location _____	
<input type="checkbox"/> First Eucharist	<u> </u> / <u> </u> / <u> </u>	Location _____	
<input type="checkbox"/> Confirmation	<u> </u> / <u> </u> / <u> </u>	Location _____	
<input type="checkbox"/> Catholic Marriage	<u> </u> / <u> </u> / <u> </u>	Location _____	

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First Language _____
Special Needs _____

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Nick Name _____
Gender M / F
MaidenName _____
Birth Place _____
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Cell Phone () - _____
High School Grad Year _____

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