



**Family Information:**

Last Name: \_\_\_\_\_  
Household Email: \_\_\_\_\_  
Primary Household Phone Number: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
\_\_\_\_\_

Would you like to receive the Catholic Virginian?

No  Yes

How would you like to do your stewardship donation?

Online  Envelopes Env. # (Staff) \_\_\_\_\_

To set up Online Giving, please scan  
the QR code here, or visit:  
www.spxnorfolk.org



Are you presently registered with another parish?

No  Yes, please name the parish: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Which of the following do we have permission to publish within the Parish?

Email  Photo  Phone Number  Address

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Would you like to receive news regarding SPX School?

No  Yes

**What Mass do you usually attend at St. Pius?**  Saturday at 5:00 p.m.  Sunday at 8:00 a.m.  Sunday at 11:00 a.m.  Daily Mass

Please Initial: \_\_\_\_\_ I understand that by registering with the church, I could be contacted by St. Pius X Staff and Ministry Leads.

**Parishioner Information: Member #1**

First Name: \_\_\_\_\_  
Last Name (if different): \_\_\_\_\_  
Sex (M/F): \_\_\_\_\_  
Race/Ethnicity: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email: \_\_\_\_\_

Maiden Name: \_\_\_\_\_  
Role in Home: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
First Language: \_\_\_\_\_  
Alternative Phone: \_\_\_\_\_ cell/work  
Special Needs: \_\_\_\_\_  
Birthday: \_\_\_\_\_

**Sacrament Information**

Religion: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Date: \_\_\_\_\_

Baptism: \_\_\_\_\_ Date: \_\_\_\_\_  
 Yes  No Location: \_\_\_\_\_

Yes  No Location: \_\_\_\_\_

First Eucharist: \_\_\_\_\_ Date: \_\_\_\_\_  
 Yes  No Location: \_\_\_\_\_

Catholic Marriage: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No Location: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Family Last Name:

**Ministry Interests & Talents and Gifts (Optional)**

What do you like to do? What are your skills, talents, and/or hobbies?

What ministries would you like to learn more about?

**Parishioner Information: Member #2**

First Name: \_\_\_\_\_

Last Name (if different): \_\_\_\_\_

Sex (M/F): \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Role in Home: \_\_\_\_\_

Occupation: \_\_\_\_\_

First Language: \_\_\_\_\_

Alternative Phone: \_\_\_\_\_ cell/work

Special Needs: \_\_\_\_\_

Birthday: \_\_\_\_\_

**Sacrament Information**

Religion: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Date: \_\_\_\_\_

Baptism: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Catholic Marriage: \_\_\_\_\_ Date: \_\_\_\_\_

First Eucharist: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Marital Status: \_\_\_\_\_

**Ministry Interests & Talents and Gifts (Optional)**

What do you like to do? What are your skills, talents, and/or hobbies?

What ministries would you like to learn more about?

**Parishioner Information: Member #3**

First Name: \_\_\_\_\_

Last Name (if different): \_\_\_\_\_

Sex (M/F): \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Role in Home: \_\_\_\_\_

Occupation: \_\_\_\_\_

First Language: \_\_\_\_\_

Alternative Phone: \_\_\_\_\_ cell/work

Special Needs: \_\_\_\_\_

Birthday: \_\_\_\_\_

**Sacrament Information**

Religion: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Date: \_\_\_\_\_

Baptism: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Catholic Marriage: \_\_\_\_\_ Date: \_\_\_\_\_

First Eucharist: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Marital Status: \_\_\_\_\_

**Ministry Interests & Talents and Gifts (Optional)**

What do you like to do? What are your skills, talents, and/or hobbies?

What ministries would you like to learn more about?

**Parishioner Information: Member #4**

First Name: \_\_\_\_\_

Last Name (if different): \_\_\_\_\_

Sex (M/F): \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Role in Home: \_\_\_\_\_

Occupation: \_\_\_\_\_

First Language: \_\_\_\_\_

Alternative Phone: \_\_\_\_\_ cell/work

Special Needs: \_\_\_\_\_

Birthday: \_\_\_\_\_

**Sacrament Information**

Religion: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Date: \_\_\_\_\_

Baptism: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Catholic Marriage: \_\_\_\_\_ Date: \_\_\_\_\_

First Eucharist: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Marital Status: \_\_\_\_\_

**Ministry Interests & Talents and Gifts (Optional)**

What do you like to do? What are your skills, talents, and/or hobbies?

What ministries would you like to learn more about?

**Parishioner Information: Member #5**

First Name: \_\_\_\_\_

Last Name (if different): \_\_\_\_\_

Sex (M/F): \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Role in Home: \_\_\_\_\_

Occupation: \_\_\_\_\_

First Language: \_\_\_\_\_

Alternative Phone: \_\_\_\_\_ cell/work

Special Needs: \_\_\_\_\_

Birthday: \_\_\_\_\_

**Sacrament Information**

Religion: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Date: \_\_\_\_\_

Baptism: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Catholic Marriage: \_\_\_\_\_ Date: \_\_\_\_\_

First Eucharist: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Marital Status: \_\_\_\_\_

**Ministry Interests & Talents and Gifts (Optional)**

What do you like to do? What are your skills, talents, and/or hobbies?

What ministries would you like to learn more about?

**Parishioner Information: Member #6**

First Name: \_\_\_\_\_

Last Name (if different): \_\_\_\_\_

Sex (M/F): \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Role in Home: \_\_\_\_\_

Occupation: \_\_\_\_\_

First Language: \_\_\_\_\_

Alternative Phone: \_\_\_\_\_ cell/work

Special Needs: \_\_\_\_\_

Birthday: \_\_\_\_\_

**Sacrament Information**

Religion: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Date: \_\_\_\_\_

Baptism: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Catholic Marriage: \_\_\_\_\_ Date: \_\_\_\_\_

First Eucharist: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Marital Status: \_\_\_\_\_

**Ministry Interests & Talents and Gifts (Optional)**

What do you like to do? What are your skills, talents, and/or hobbies?

What ministries would you like to learn more about?

**Parishioner Information: Member #7**

First Name: \_\_\_\_\_

Last Name (if different): \_\_\_\_\_

Sex (M/F): \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Role in Home: \_\_\_\_\_

Occupation: \_\_\_\_\_

First Language: \_\_\_\_\_

Alternative Phone: \_\_\_\_\_ cell/work

Special Needs: \_\_\_\_\_

Birthday: \_\_\_\_\_

**Sacrament Information**

Religion: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Date: \_\_\_\_\_

Baptism: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Catholic Marriage: \_\_\_\_\_ Date: \_\_\_\_\_

First Eucharist: \_\_\_\_\_ Date: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Yes  No

Location: \_\_\_\_\_

Marital Status: \_\_\_\_\_

**Ministry Interests & Talents and Gifts (Optional)**

What do you like to do? What are your skills, talents, and/or hobbies?

What ministries would you like to learn more about?

If you have more family members, please fill out another form.