Registration Date:

**St. Mark University Parish**

1316 Peger Rd, Fairbanks, AK 99509-5199 (907) 374-9564

**Family Registration**

Head of Household: Last Name: First Name:

Address:

City: State: Zip:

Home Phone: Cell Phone:

Family Email:

**Individual Adult Member Information**

Adult 1

First Name: Last Name (if different than above)

Parish Status: Active /Inactive UAF Student: yes no

Gender: Male / Female DOB:

Home or Cell Phone (if different than above):

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes no Date: Church: City:

Confirmed: yes / no Date: Church: City:

Marital Status: Single / Married / Separated / Divorced / Annulled

Valid Catholic Marriage: yes / no

Adult 2

First Name: Last Name (if different than above)

Parish Status: Active /Inactive UAF Student: yes no

Gender: Male / Female DOB:

Home or Cell Phone (if different than above):

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes no Date: Church: City:

Confirmed: yes / no Date: Church: City:

Marital Status: Single / Married / Separated / Divorced / Annulled

Valid Catholic Marriage: yes / no

**Dependent Children Information**

Dependent 1: Relationship to Adults Above: Son / Daughter / Other

First Name: Last Name:

Gender: Birthdate: Birthplace:

First Language:

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes / no Date: Church: City:

Confirmed: yes / no Date Church: City:

Dependent 2: Relationship to Adults Above: Son / Daughter / Other

First Name: Last Name:

Gender: Birthdate: Birthplace:

First Language:

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes / no Date: Church: City:

Confirmed: yes / no Date Church: City:

Dependent 3: Relationship to Adults Above: Son / Daughter / Other

First Name: Last Name:

Gender: Birthdate: Birthplace:

First Language:

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes / no Date: Church: City:

Confirmed: yes / no Date Church: City:

Dependent 4: Relationship to Adults Above: Son / Daughter / Other

First Name: Last Name:

Gender: Birthdate: Birthplace:

First Language:

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes / no Date: Church: City:

Confirmed: yes / no Date Church: City:

**Dependent Children Information – Page 2**

Dependent 5: Relationship to Adults Above: Son / Daughter / Other

First Name: Last Name:

Gender: Birthdate: Birthplace:

First Language:

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes / no Date: Church: City:

Confirmed: yes / no Date Church: City:

Dependent 6: Relationship to Adults Above: Son / Daughter / Other

First Name: Last Name:

Gender: Birthdate: Birthplace:

First Language:

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes / no Date: Church: City:

Confirmed: yes / no Date Church: City:

Dependent 7 Relationship to Adults Above: Son / Daughter / Other

First Name: Last Name:

Gender: Birthdate: Birthplace:

First Language:

Sacramental Info: Catholic: yes / no

Baptized: yes / no Date: Church: City:

First Eucharist: yes / no Date: Church: City:

Confirmed: yes / no Date Church: City:

All information submitted on this form is confidential and used only for reporting membership in the Parish.

In which Ministry do you wish to serve at St. Mark?

What brings you to St. Mark?

1316 Peger Rd., Fairbanks, AK 99709-5199 Telephone: 907-374-9564 Email: [stmark@cbna.org](mailto:stmark@cbna.org) Webpage: <https://www.stmarksuaf.org>