



WELCOME TO ST. BERNARD PARISH

**REGISTRATION FORM**  
**St. Bernard Church**

25 St. Bernard Terrace, Rockville, CT 06066

Phone: 860.875.0753 FAX: 860.871.7460

E-mail: rectory@saintbernardchurch.org

**Instructions:** Please provide this information so that we can serve you better. Please return this form by mail using the enclosed envelope, or drop it the collection basket at any weekend Mass.

**Family Mailing Information**

Please Print:

Today's Date \_\_\_\_\_

Prefix: \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ ZIP: \_\_\_\_\_ - \_\_\_\_\_

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

Do you want weekly Parish Envelopes to help you with your stewardship commitment?  Yes  No

Last Name <i>Please include maiden name under your last name.</i>	First Name <i>If you use a nickname, please include it under your first name.</i>	Middle Name	Sex	Birth date mm/dd/yyyy	Religion	Baptism	First Eucharist	Confirmation	Marital Status	Marriage	E-mail address
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Please describe any special needs that any member of your family or you may have: