

St. Catharine- St. Margaret Parish Family Registration Form

Date:

Please complete the following form. Once complete, please save a copy of this form on your computer. You may then--

Print and mail the form to or email the form to:

St. Catharine Church
215 Essex Avenue
Spring Lake, NJ 07762

Contactus@scsmsl.org

Family Information

Family Last Name		Mailing Label Name (e.g., Mr. and Mrs. John Doe, John and Mary Doe, etc.)	
Street Address			
City, State		Zip	
Mailing Address (if different from above)			
Primary Phone	Cell Phone	Family Email	

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Please include any additional information you would like to share here: