

ST. CLARE OF ASSISI
Parishioner Registration

Last Name: _____

First Name: _____

Initials: _____

Address: _____

Apt #: _____

City: _____

Postal Code: _____

Telephone - Home: _____

Telephone - Work: _____

Email: _____

Do you require a box of church envelopes for income tax purposes? Yes No

Important note:

If envelopes are left unclaimed – they will be re-assigned to someone else. Please only request envelopes if you will use them weekly.