



St. Stephen Catholic Church
 10118 Saint Stephen Circle, Riverview, FL • (813) 689-4900

Parish Registration

Date: _____

Family Last Name: _____ Tel. No.: _____ Listed Unlisted

Home Address: _____ City, State: _____ Zip Code: _____

Mail Address: _____ City, State: _____ Email: _____

Recognized Catholic Marriage? Yes () No () Civil Marriage? () (all data is secure with us)

Are you interested in our Catholic school? Yes () No () Would you like to receive our weekly E-Newsletter? Y () N () (please provide email above)



Fluent language (other than English): _____ Best time to call: _____

Consent to publish family name(s) on the church website and in any parish publication: Yes () No ()

Please consider using our online giving option - you can scan the code at left and make contributions according to choice.
 If you wish to have instructions emailed to you, please indicate your email for this purpose:

Family Members Information	Last Name	First Name	MI	Religion	Cell Phone No.	Occupation	M/F	Date of Birth	Baptized	1st Communion	Confirmation	Married
Head								/ /				
Spouse								/ /				
Child #1								/ /				
Child #2								/ /				
Child #3								/ /				
Child #4								/ /				
Child #5								/ /				
Child #6								/ /				