

WELCOME TO: ST. PIUS X PARISH

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For Office use only

PDS \_\_\_\_\_

ENV \_\_\_\_\_

NEW \_\_\_\_\_

WEL \_\_\_\_\_

PARISH REGISTRATION

(Please print)

Last Name :

How would you like your mail addressed?

Mr. ( ) Dr. ( )

Ms. ( ) Dr. & Mrs. ( )

Mr. & Mrs. ( ) Other :

Address:

(Include Apt./Trailer #)

City/Zip

Home Phone:

Email Address:

FAMILY MEMBERS Print First and Last Name (if different from above)		MARITAL STATUS	GENDER	BIRTHDATE	RELIGION	ADULT'S OCCUPATION/EMPLOYER	SACRAMENTS (Approx. Date)
<u>Head of Household:</u>						Occupation: Employer: Phone:	Bap. _____ 1st Comm. _____ Conf. _____
<u>Spouse:</u>						Occupation: Employer: Phone:	Bap. _____ 1st Comm. _____ Conf. _____
Print First and Last Name (if different from above)			GENDER	BIRTHDATE	RELIGION	CHILD'S SCHOOL/GRADE	SACRAMENTS (Approx. Date)
<u>Child:</u>							Bap. _____ 1st Comm. _____ Conf. _____
<u>Child:</u>							Bap. _____ 1st Comm. _____ Conf. _____
<u>Child:</u>							Bap. _____ 1st Comm. _____ Conf. _____
<u>Child:</u>							Bap. _____ 1st Comm. _____ Conf. _____

<u>Child:</u>					Bap. _____ 1st Comm. _____ Conf. _____
<u>Child:</u>					Bap. _____ 1st Comm. _____ Conf. _____

Family or Individual Interests, Questions, or  
Concerns: \_\_\_\_\_

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**PLEASE RETURN THIS FORM TO THE OFFICE OR PLACE IN THE SUNDAY COLLECTION BASKET**