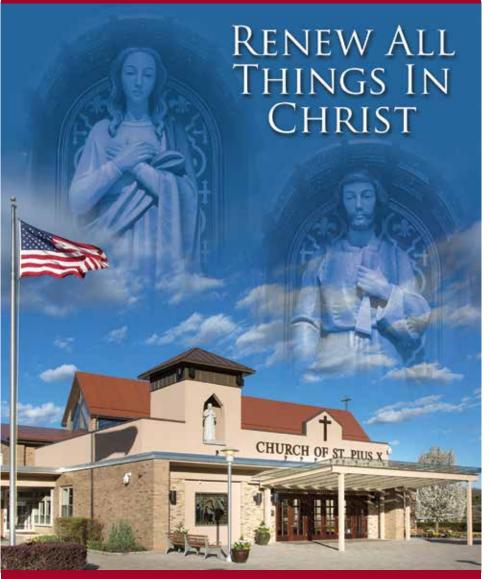
Parish Registration Form



Church of Saint Pius X

A Roman Catholic Faith Community Founded 1954 • Renovated 2013



Office: 91 Secor Road, Scarsdale, NY 10583
Telephone: 914.725.2755 • Fax: 914.725.2782
Website: www.spxny.org • Email: spx@spxny.org

Parish Registration Form

Please Print

Family Last Name						Maiden Name						
Street Address			 -	Apt#		Phone						
City and Zip						Primary Phone	?	Cell Phone #1 mer Resident (Mont		Phone #2 e this area each	ı year:)	
Mailing Address	f different from above)					Email:						
(1.	rumerent from above)											
First Name	Middle Initial	Last Name (if different from above)	Single Married Widow(er) Separated Divorced	Sex M F	Date of Birth M/D/Yr.	Catholic (Religion, if not Catholic)	Baptized Y/N (Date, if known)	1st Communion Y/N (Date, if known)	Y/N (Date, if known)	Mass Attendance Weekly Monthly Seldom	Primary Language Spoken	
Dependent Child First Name	ren Living at Home	Last Name										
Husband's Occupa	ation & Employer: _					Parish of Previous	s Registration (Church Name & Ad	dress):			
•	- ,											
Wife's Occupation & Employer:						May we publish photos of your family members participating in our parish life activities? ☐ Yes ☐ No						
If Retired, Former	Occupation:							r situations that you I we will contact you		our attention?		
Office use only	Office use only: PDS RE Communication					Letter		Welcome	Ministry			

Offertory Donations

Thank you for your generosity.

The expression of your offertory commitment helps your parish plan its budget. If you would like us to mail you offertory envelopes, please check here.

We Share (scan the QR code or visit https://saintpiusxchurch.churchgiving.com/).

\$______ per week \$______ per year

Alternatively, you may sign-up for automatic giving by bank or credit card online at

Date:	
= ****	