

Last Name		date of birth	Address:
First Name		/ /	
Spouse		/ /	City & Zip:
Child 1		/ /	home phone:
Child 2		/ /	work phone:
Child 3		/ /	cell phone:
Child 4		/ /	email (print clearly)
Is there any special information that you think we should know about you? eg: special needs, abilities?			

Are you married? Yes / No      \_\_\_ Civil Marriage    \_\_\_ Not Married    \_\_\_ Divorced    \_\_\_ Widowed  
 (circle one)                            \_\_\_ Catholic Church Marriage (please check one)

Would you like to receive Sunday Offering Envelopes? (circle one): Yes / No

**Please mail or fax this card to:**

**Saint Sebastian Church  
 373 Bon Air Road  
 Greenbrae, CA 94904-1709**

**Fax (415) 461-2018**