



The Church of the Sacred Heart

343 South Broad Street, Trenton, NJ 08608
(609) 393-2801

April 5, 2006

Dear Sacred Heart Parishioners;

Due to the closing of two parishes and the merging of others, Sacred Heart has accumulated more parishioners within the last couple of months. Fr. Mick, pastor of the Church of the Sacred Heart, has asked me to update all the census files. Enclosed you will find a form which needs to be completed and sent back in order for your file to be updated. Updating your file is important to us, so that we would be able to serve you better in the future.

Unfortunately, due to the amount of the files that need to be update, we are asking you to return this form as soon as possible (within two weeks would be most helpful). If we do not receive this form, we will assume that you are not interested in continuing as a parishioner of this parish. I have enclosed a self-address, self-stamp envelope for your convenience.

Thank you for your time and for being a part of the family of the Sacred Heart. It is an honor to serve you as a seminarian. May God continue to bless you always.

Yours in Christ;

Joseph DiGianni
Seminarian of the Diocese of Trenton



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Registration Update Form

Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Occupation: _____

Relation to Head of Household _____ Religion _____

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Occupation: _____

Relation to Head of Household _____ Religion _____

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Married in the Church ___ Yes ___ No Date of Marriage ____ / ____ / ____

Address: _____

City/State/Zip: _____

Email Address: _____

Home Phone #: _____

Work Phone #: _____

Cell Phone #: _____

Other people living in your household – please list on the back of this form.

Note: Any one listed, which is over the age of 21, will be listed in the church as an Adult.

Additional Information:

___ I would like to speak to the pastor about blessing my marriage.

___ I would like to speak to the pastor about renewing my marriage vows.

___ I would like to speak to the pastor about annulment.

___ I would like to speak to the pastor about baptism, communion or confirmation.

If any, please list any committees or services to the church: _____

Additional Residences in your Household:

1. Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Relation _____ Religion _____ Occupation _____

2. Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Relation _____ Religion _____ Occupation _____

3. Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Relation _____ Religion _____ Occupation _____

4. Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Relation _____ Religion _____ Occupation _____

5. Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Relation _____ Religion _____ Occupation _____

6. Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Relation _____ Religion _____ Occupation _____

7. Name: _____ Birth date: ____ / ____ / ____

Marital Status: ___ Single ___ Married ___ Widow ___ Divorced ___ Separated

Baptism ___ Yes ___ No 1st Communion ___ Yes ___ No Confirmation ___ Yes ___ No

Relation _____ Religion _____ Occupation _____