



Quinceañera Registration St. Patrick's Catholic Church

710 West Marion Street ♦ Joliet, IL 60436-1556 ♦ (815) 727-4746

If you are completing this form online, please save this document on your computer and email your attachment to stpatrectory0710@sbcglobal.net

Name of Quinceañera: _____

Address: _____

City: _____ Phone: _____

Place of Birth: _____ Date of Birth: _____

* Baptism: Yes No Date: _____

* First Communion: Yes No Date: _____

* Confirmation: Yes No Date: _____

Father's Name: _____ Religion: _____

Mother's Maiden Name: _____ Religion: _____

Place - Parents' Marr.: _____ Date of Marr.: _____

Registered: Yes No

Attended Retreat: Yes No Date: _____

Date of de Quinceañera: _____ Time: _____

Signed By: _____
(Priest/Deacon)

** Must Supply Certificates of Baptism, First Communion & Confirmation prior to Quinceañera.*

Office Use Only: Paid in Full Deposit: _____

