

CHILD/OTHER HOUSEHOLD MEMBER

Name: Including last if different than family name			
Date of Birth		Religion	
Date/Place of Baptism		Date/Place of Confirmation	
Date/Place of Eucharist		Relationship	

How often do you attend Church? (Circle one of the following)
 Weekly Occasionally Seldom Do Not Attend

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PARISH REGISTRATION FORM

Family Last Name _____

Street Number and Name _____

City _____ Zip Code _____

Telephone number _____ Is your phone number unlisted? _____

Registration Date _____ May your address & phone be listed in our parish directory? _____

Does your family have any special needs we should be aware of? _____

Would you like monthly or weekly envelope mailings? (Circle one) Monthly Weekly Envelope # _____

What title do you want to use on the mailings? (Mr. & Mrs., Mr., Mrs., Ms. Dr.) _____

FAMILY INFORMATION

Are you... (Circle one) (1) Married (2) Single (3) Widowed (4) Divorced (5) Separated.

Married by Catholic
Priest/Deacon?

Marriage Date:

Church:

City:

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If you are divorced, has the marriage been annulled? (Circle one) Yes No

ADULT 1

Name: Include Maiden name if Applicable			
Date of Birth		Religion	
Date/Place of Baptism		Date/Place of Confirmation	
Date/Place of Eucharist		Occupation	

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ADULT 2

Name: Include Maiden name if Applicable			
Date of Birth		Religion	
Date/Place of Baptism		Date/Place of Confirmation	
Date/Place of Eucharist		Occupation	

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(Please list children or other household members on reverse)

Office use only... Green card [] Parishsoft [] CSA [] Packet (welcome letter and envelopes) []

Reviewed by pastor _____ Date _____