

Parish Registration Form

For Office Use
ENV#

Are you currently registered with another Parish?	N Y,Pari	sh Name:					
Would you like an introductory meeting with the priest?	YN					tate:	
Would you like to enroll in online giving?] N	Would you like t	o receive contrib	oution envelopes?	? \[\text{Y}	□N	
Do we have permission to publish the following information Would you like to receive the following?		arish? Photo	Email	Phone Nur	mber	Address	
Head of Household	Nicknam	e:					
Last Name:	First:		Mid	dle Name:			_
Title: Mr. Mrs. Ms. Ms.	ss Dr.		Suffix S	. 🔲 Jr.		III	
Maiden Name (if applicable):							
Home Phone: Co							
Street Address:							
City: §	State:		Zip:				
Religion: Da	ate of Birth:		_ Place:				
Occupation:		Email Address:					
Marital Status: Single Civil Marriage	Catholic Marr	iage Divorced	d Widowed	Separ	ated		
Sacraments Received: Baptis	sm	Communion		Confirmation			
Sacrament Parish Location(s):							
Race: 1st Language (if not English):							
Race and Hispanic Origin Codes: AA: America Islander, T: Two or More Races, HL: Hispanic or Language - S: Spanish E: English V: Vietname Disability - B: Legally Blind D: Developmentally Spouse / Other Adult	Latino, W: Whese K : Korean Disabled H : F	ite O: Other (specify)	: Physically Di				
Last Name:				dle Name:			_
Title: Mr. Mrs. Ms. Ms.	ss Dr.		Suffix S	Jr.	Ш	□ III □.	
Maiden Name (if applicable):							_
Home Phone: Co	ell Phone:		Work	Phone:			
Street Address:							
City: §	State:		Zip:				
Religion:	ate of Birth:		Place:				
Occupation:		Email Address:					
Marital Status: Single Civil Marriage	Catholic Marr	iage Divorced	d Widowed	Separ	ated		
Sacraments Received:	sm	Communion		Confirmation			
Sacrament Parish Location(s):							
Race: 1st Language (if not English):		2nd Language	:	Disabilit	y:		
Signature of the person completing the form:				Date:			

Child 1 / Other Adult Last Name:	Nickname:		le Name [.]	
Title: Mr. Mrs. Ms. Miss				
Relation to Head of Household: Child Step	_	_	_	
Grade: School:		_		
Religion: Da				_
	Communion			
_ .		_		
Race: 1st Language (if not English):	2nd La	nguage:	Disabi	lity:
Child 2 / Other Adult	Nickname:			
Last Name:	First:	Mide	dle Name:	
Title: Mr. Mrs. Ms. Miss	s Dr	Suffix Sr	. 🔲 Jr.	II III
Relation to Head of Household: Child Ste	epchild Grandchild	Other		
Grade: School:		Catholic	Private	Public
Religion:	Date of Birth:	Place: _		
Sacraments Received: Baptism Location(s):	Communion	_		
Race: 1st Language (if not English):_	2nd L	anguage:	Disab	oility:
Child 3 / Other Adult	Nickname:			
Child 3 / Other Adult Last Name:			dle Name:	
	First:	Midd		
Last Name:	First:	Mido	☐Jr.	_ II
Last Name: Mrs Ms Miss	First: B Dr Copenhild Grandchild	Mido Suffix	□Jr.	
Last Name: Title: Mr. Mrs. Ms. Miss Relation to Head of Household: Child Ste	First: B Dr PochildGrandchild	Mido Suffix Sr. Other Catholic	□Jr.	
Last Name: Title:	First: B Dr PochildGrandchild	Mido Suffix	☐Jr.	
Last Name: Title:	First: Dr pochildGrandchild Date of Birth: Communion	Suffix Sr. Suffix Sr. Catholic Place: Confirmation	∏Jr.	II III
Last Name: Title:	First: Dr pochildGrandchild Date of Birth: Communion	Suffix Sr. Suffix Sr. Catholic Place: Confirmation	∏Jr.	
Last Name: Title:	First: Dr. Dr. Dr. Dr. Dr. Dr. Dr. Dr.	Suffix Sr. Suffix Sr. Catholic Place: Confirmation	☐ Jr. ☐ Private ☐ Disab	
Last Name: Title: Mr. Mrs. Ms. Miss Relation to Head of Household: Child Ste Grade: School: Religion: D Sacraments Received: Baptism Location(s): Race: 1st Language (if not English):	First: Dr. Dr. Dr. Dr. Dr. Dr. Dr. Dr.	Suffix Sr. Suffix Sr. Str. Str. Str. Str. Str. Str. Str. S	☐Jr. ☐Private ☐Disab	
Last Name: Title:	First: First: Pr. Pr. Pr. Pr. Pr. Pr. Pr. Pr. Pr. Pr. P	Middle Middle Suffix	□ Jr. □ Private □ Disab	
Last Name: Title:	First: Dr.	Middle Middle Suffix	☐Jr. ☐Private ☐Disab	
Last Name: Title:	First: Dr.	Middle Suffix	☐ Jr. ☐ Private ☐ Disab	
Last Name: Title:	First: Dr.	Middle Suffix	☐ Jr. ☐ Private ☐ Disab	