



# NEW PARISHIONER REGISTRATION

Family Name \_\_\_\_\_

Full Address \_\_\_\_\_

Phone \_\_\_\_\_ Primary Email \_\_\_\_\_

## Head of Household

Mr. \_\_\_ Mrs. \_\_\_ Dr. \_\_\_ Ms. \_\_\_ Miss \_\_\_

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Birth Date \_\_\_\_\_ Sex M \_\_\_ F \_\_\_ Marital Status \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Work Phone \_\_\_\_\_

Religion \_\_\_\_\_ Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

Baptized? Yes \_\_\_ No \_\_\_ First Communion? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

\*From marital status above, if currently married, please complete the following:

Church/City/State of Wedding \_\_\_\_\_

Wedding Date \_\_\_\_\_

Previously Married? Yes \_\_\_ No \_\_\_

## Adult #2

Mr. \_\_\_ Mrs. \_\_\_ Dr. \_\_\_ Ms. \_\_\_ Miss \_\_\_

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Birth Date \_\_\_\_\_ Sex M \_\_\_ F \_\_\_ Marital Status \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Work Phone \_\_\_\_\_

Religion \_\_\_\_\_ Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

Baptized? Yes \_\_\_ No \_\_\_ First Communion? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

**Child #1**

First Name \_\_\_\_\_ Preferred Name \_\_\_\_\_ Middle \_\_\_\_\_

Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Sex M \_\_\_ F \_\_\_ Religion \_\_\_\_\_

Baptized? Yes \_\_\_ No \_\_\_ First Eucharist? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

---

**Child #2**

First Name \_\_\_\_\_ Preferred Name \_\_\_\_\_ Middle \_\_\_\_\_

Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Sex M \_\_\_ F \_\_\_ Religion \_\_\_\_\_

Baptized? Yes \_\_\_ No \_\_\_ First Eucharist? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

---

**Child #3**

First Name \_\_\_\_\_ Preferred Name \_\_\_\_\_ Middle \_\_\_\_\_

Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Sex M \_\_\_ F \_\_\_ Religion \_\_\_\_\_

Baptized? Yes \_\_\_ No \_\_\_ First Eucharist? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

---

**Child #4**

First Name \_\_\_\_\_ Preferred Name \_\_\_\_\_ Middle \_\_\_\_\_

Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Sex M \_\_\_ F \_\_\_ Religion \_\_\_\_\_

Baptized? Yes \_\_\_ No \_\_\_ First Eucharist? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_