

Best phone #:

Parish Registration Form

			Date:						
What is the last name you would like us to use	for your household?								
Street Address			Apt #						
City	State		Zip						
Best phone # to use:	1	Best E-Mail to use:	L						
Mailing Address (if different from street address)		Seasonal Address (please indicate months, and if mailings should continue)							
Do we have permission to send e-mails? YES	. NO Do	we have permission to	send texts? YES NO						
Adults in Household									
ADULT #1 Status:	Single Married	Divorced	Widowed						
Sacraments Received: Baptism Eucharist Confirmation Marriage									
Name:	Maiden Name (if applic	able):	Date of Birth:						
Religion:	Occupation:		Church of Marriage (Parish & Town):						
Best phone #:	Alternate phone:		E-Mail						
			L						
ADULT #2 Status:	Single Married	Divorced	Widowed						
Sacraments Received: Baptism_	Eucharist	Confirmation_	Marriage						
Name:	Maiden Name (if applic		Date of Birth:						
Religion:	Occupation:		Church of Marriage (Parish & Town):						
Best phone #:	Alternate phone:		E-Mail						
ADULT #3 Status:	Single Married	Divorced	Widowed						
Sacraments Received: Baptism	Eucharist	Confirmation	Marriage						
Name:	Maiden Name (if applic		Date of Birth:						
Religion:	Occupation:		Church of Marriage (Parish & Town):						
Best phone #:	Alternate phone:		E-Mail						
	1		1						
ADULT #4 Status:	Single Married	Divorced	Widowed						
Sacraments Received:	Euchovict	Confirmation	Marriago						
Name: Baptism_	Eucharist Maiden Name (if applic	Confirmation	Marriage Date of Birth:						
Religion:	Occupation:		Church of Marriage (Parish & Town):						
	i .		1						

Alternate phone:

E-Mail

Children Living at Ho	me						
First & Last Name:		Date of Birth:		First & Last Name:		Date of Birth:	
School:	SacramentsBaptism 1st Com	า	Will this child be enrolled in Faith Formation?	School:	Sacrament Baptis		Will this child be enrolled in Faith Formation?
		nation	YES NO		Confirmation		YES NO
Cell #:	E-Mail:			Cell #:		E-Mail:	
First & Last Name:		Date of Birth:		First & Last Name:		T =	
						Date of Birth:	
School:	Sacraments		Will this child be	School:	Sacrament		Will this child be
	Baptism		enrolled in Faith		Baptis		enrolled in Faith
	1st Com		Formation? YES NO		1st Cor		Formation? YES NO
	Confirm	nation			Confir	mation	
Cell #:		E-Mail:		Cell #:		E-Mail:	
First & Last Name:	ame: Date of B		rth:	First & Last Name:		Date of Birth:	
Calanali	Community	D/ -l	VARIH Alice of the leading	Calacal		- D/ -l	ANCHARL - LUI L
School:	Sacraments		Will this child be enrolled in Faith	School:	Sacrament		Will this child be
	Baptism				Baptis		enrolled in Faith
	1st Com		Formation?		l ——	mmunion	Formation?
	Confirm	Confirmation YES		Confii		mation	YES NO
Cell #:		E-Mail:		Cell #:		E-Mail:	
				1			
First & Last Name:		Date of Birth:		First & Last Name:		Date of Birth:	
School:	Sacraments	Rec'd	Will this child be	School:	Sacrament	ts Rec'd	Will this child be
	Baptism		enrolled in Faith		Baptis	m	enrolled in Faith
	1st Com	munion	Formation?YESNO		1st Cor	mmunion	Formation?
	Confirm	nation			Confir	Confirmation YES	
- "						T =	
Cell #:		E-Mail:		Cell #:		E-Mail:	
If you do not have off	ertory envelop	es, would y	you like them? YES	NO			
Are you enrolled in O	nline Giving?	YES	_ NO I w	ould like to learn m	nore about Online	Giving	_
Parish Involvement- A	re you interest	ed in any o	of the following?				
Altar Servers			Hospitality Ministry_		Praver Shav	wl & Knit C	rochet, Sew Ministry
Greeters							
Lectors			Outreach & Commun			pirituality & Retreat tuality & Retreat	
		Knights of Columbus_			ible Camp		
Eucharistic Ministry_			Becoming a Member of the Catholic				
		Building & Grounds Co					
Faith Formation Teac			Giving Garden Minist		——————————————————————————————————————		
			handyman, plumber, ele			eting, landso	caping, photographer,
videography, baking,	technical, etc.)						
How did you hear abo	out our parish:						
Any additional commo	ents:						
For office use only:							
Date Rec'd	Da	ate entere	d into PDMS	Parish Env	velope Number		