

**HOLY FAMILY PARISH  
REGISTRATION & INFORMATION FORM**

DATE \_\_\_\_\_

FAMILY LAST NAME <i>(PLEASE PRINT)</i>	FAMILY HOME PHONE <i>(IF APPLICABLE)</i>	SPOUSE/PARTNER LAST NAME <i>(IF DIFFERENT)</i>
HOME ADDRESS		

PERSONAL INFORMATION

HEAD OF HOUSEHOLD INFORMATION

FIRST NAME \_\_\_\_\_ MIDDLE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ CELL PHONE \_\_\_\_\_

OCCUPATION \_\_\_\_\_

EMPLOYER \_\_\_\_\_

IF RETIRED, FORMER OCCUPATION \_\_\_\_\_

CATHOLIC?  YES \_\_\_\_\_

MARITAL STATUS:  SINGLE  MARRIED  SEPARATED  DIVORCED  
 WIDOWED  LIVING WITH PARTNER

SACRAMENT INFORMATION

BAPTISM *WHERE & YEAR* \_\_\_\_\_

1<sup>ST</sup> COMMUNION *WHERE & YEAR* \_\_\_\_\_

CONFIRMATION *WHERE & YEAR* \_\_\_\_\_

MATRIMONY *DATE OF MARRIAGE* \_\_\_\_\_

*CHURCH/ CITY WHERE MARRIED* \_\_\_\_\_

IF DIVORCED, WAS YOUR MARRIAGE ANNULLED?  YES  NO

IF NOT ANNULLED, INTERESTED IN OBTAINING ONE?  YES  NO

SPOUSE/PARTNER INFORMATION

FIRST/MIDDLE \_\_\_\_\_ MAIDEN \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ CELL PHONE \_\_\_\_\_

OCCUPATION \_\_\_\_\_

EMPLOYER \_\_\_\_\_

IF RETIRED, FORMER OCCUPATION \_\_\_\_\_

RELIGIOUS FAITH \_\_\_\_\_

MARITAL STATUS:  SINGLE  MARRIED  SEPARATED  DIVORCED  
 WIDOWED  LIVING WITH PARTNER

SACRAMENT INFORMATION

BAPTISM *WHERE & YEAR* \_\_\_\_\_

1<sup>ST</sup> COMMUNION *WHERE & YEAR* \_\_\_\_\_

CONFIRMATION *WHERE & YEAR* \_\_\_\_\_

MATRIMONY *DATE OF MARRIAGE* \_\_\_\_\_

*CHURCH/ CITY WHERE MARRIED* \_\_\_\_\_

IF DIVORCED, WAS YOUR MARRIAGE ANNULLED?  YES  NO

IF NOT ANNULLED, INTERESTED IN OBTAINING ONE?  YES  NO

DO YOU WISH TO RECEIVE CONTRIBUTION ENVELOPES?  YES  NO

**WHAT HOLY FAMILY PARISH ACTIVITIES ARE YOU OR ANY FAMILY MEMBER INTERESTED IN?**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> BINGO VOLUNTEER       | <input type="checkbox"/> ALTAR ROSARY SOCIETY  | <input type="checkbox"/> BELL CHOIR – YOUTH        |
| <input type="checkbox"/> BINGO KITCHEN         | <input type="checkbox"/> CCD TEACHER           | <input type="checkbox"/> BELL CHOIR – ADULTS       |
| <input type="checkbox"/> FESTIVAL VOLUNTEER    | <input type="checkbox"/> YOUTH GROUP           | <input type="checkbox"/> CHOIR – YOUTH             |
| <input type="checkbox"/> PARISH COUNCIL        | <input type="checkbox"/> FINANCE COUNCIL       | <input type="checkbox"/> CHOIR – ADULT             |
| <input type="checkbox"/> LECTOR                | <input type="checkbox"/> EUCHARISTIC MINISTER  | <input type="checkbox"/> ALTAR SERVER              |
| <input type="checkbox"/> EUCHARISTIC ADORATION | <input type="checkbox"/> CEMETERY COMMITTEE    | <input type="checkbox"/> KNIGHTS OF COLUMBUS #5582 |
| <input type="checkbox"/> PRAYER SHAWL          | <input type="checkbox"/> WORSHIP COMMITTEE     |  |
| <input type="checkbox"/> FAMILY LIFE COMMITTEE | <input type="checkbox"/> OTHER INTERESTS _____ |  |

(CONTINUE ON BACK)

**CHILDREN AND OTHER HOUSEHOLD MEMBERS INFORMATION**

FIRST NAME/MIDDLE \_\_\_\_\_  
LAST NAME (IF DIFFERENT) \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SCHOOL \_\_\_\_\_  
GRADE \_\_\_\_\_ ATTENDS CCD?  Yes  No  
BAPTISM (WHERE/DATE) \_\_\_\_\_  
1<sup>ST</sup> COMMUNION (WHERE/DATE) \_\_\_\_\_  
CONFIRMATION (WHERE/DATE) \_\_\_\_\_

FIRST NAME/MIDDLE \_\_\_\_\_  
LAST NAME (IF DIFFERENT) \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SCHOOL \_\_\_\_\_  
GRADE \_\_\_\_\_ ATTENDS CCD?  Yes  No  
BAPTISM (WHERE/DATE) \_\_\_\_\_  
1<sup>ST</sup> COMMUNION (WHERE/DATE) \_\_\_\_\_  
CONFIRMATION (WHERE/DATE) \_\_\_\_\_

FIRST NAME/MIDDLE \_\_\_\_\_  
LAST NAME (IF DIFFERENT) \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SCHOOL \_\_\_\_\_  
GRADE \_\_\_\_\_ ATTENDS CCD?  Yes  No  
BAPTISM (WHERE/DATE) \_\_\_\_\_  
1<sup>ST</sup> COMMUNION (WHERE/DATE) \_\_\_\_\_  
CONFIRMATION (WHERE/DATE) \_\_\_\_\_

FIRST NAME/MIDDLE \_\_\_\_\_  
LAST NAME (IF DIFFERENT) \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SCHOOL \_\_\_\_\_  
GRADE \_\_\_\_\_ ATTENDS CCD?  Yes  No  
BAPTISM (WHERE/DATE) \_\_\_\_\_  
1<sup>ST</sup> COMMUNION (WHERE/DATE) \_\_\_\_\_  
CONFIRMATION (WHERE/DATE) \_\_\_\_\_

FIRST NAME/MIDDLE \_\_\_\_\_  
LAST NAME (IF DIFFERENT) \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SCHOOL \_\_\_\_\_  
GRADE \_\_\_\_\_ ATTENDS CCD?  Yes  No  
BAPTISM (WHERE/DATE) \_\_\_\_\_  
1<sup>ST</sup> COMMUNION (WHERE/DATE) \_\_\_\_\_  
CONFIRMATION (WHERE/DATE) \_\_\_\_\_

FIRST NAME/MIDDLE \_\_\_\_\_  
LAST NAME (IF DIFFERENT) \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_  
SCHOOL \_\_\_\_\_  
GRADE \_\_\_\_\_ ATTENDS CCD?  Yes  No  
BAPTISM (WHERE/DATE) \_\_\_\_\_  
1<sup>ST</sup> COMMUNION (WHERE/DATE) \_\_\_\_\_  
CONFIRMATION (WHERE/DATE) \_\_\_\_\_

ARE YOU SEEKING SACRAMENTS FOR ANY OF YOUR CHILDREN?  Yes  No

ARE YOU A SNOWBIRD?  Yes  No IF YES, WOULD YOU LIKE YOUR CHURCH MAIL FORWARDED TO YOU?  NO FORWARDING DESIRED

WINTER ADDRESS \_\_\_\_\_

ARE ANY IMMEDIATE FAMILY MEMBERS LIVING IN A NURSING HOME?  Yes  No

IF YES, WHICH FACILITY? \_\_\_\_\_

IS A MEMBER OF YOUR FAMILY HOMEBOUND?  Yes  No NAME \_\_\_\_\_