

FAMILY REGISTRATION

OUR LADY OF LOURDES PARISH
528 E. Stein Highway
Seaford, Delaware 19973
Telephone (302) 629-3591 Fax (302) 629-6758

ID # _____ (office use only)

Please print
All information is confidential

To Whom Should Mail Be Addressed?

Title, First Name(s), Last Name(s): _____

If not listed above, spouse's Full Name: _____

Street Address: _____

Development or Apartment Complex: _____

City & State: _____ Zip + 4 (if known): _____

Home Phone: _____ Other Phone: _____

Date of Registration: _____

Family Status (circle one) 2-Parent Family Single Parent Family Blended Family Sr. Citizen Household No Children Single

Mailing Address (if different from street address): _____

City & State: _____ Zip + 4 (if known): _____

Second Residence Address (if applicable): _____

City & State: _____ Zip + 4 (if known): _____

Phone: _____

Usually at Second Residence From _____ To _____

Send Mail to Second Residence during that time (circle one): Yes No

MEMBER REGISTRATION UPDATE

Please complete for each member of household, unless they wish to register separately.

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ID # _____ (office use only)

Member Name – Last, First, M.I.: _____ Nickname: _____
Maiden Name: _____ Title (Mr., Mrs., Ms, Miss, Dr.): _____ Suffix (Sr., Jr., II, etc., if used): _____
Status in Household (circle one): head of house spouse minor child adult child College student away in
military other (specify): _____
Marital Status (circle one): Single Valid Catholic Marriage Other Marriage Divorced/Separated Widowed Other
(specify) _____
Religion (circle one): Catholic Other Christian (specify) _____ Non-Christian
Handicap (specify): _____ Ethnicity (specify): _____
Languages Spoken (specify): _____
Occupation (if retired, please indicate occupation/retired) or Student: _____
Employer or School: _____ Business Phone: _____
Date of Birth: _____ Gender: _____ Level Completed or Current Grade: _____
Attend Mass (circle one): weekly occasionally rarely
E-mail Address: _____
(Provide only if you wish to receive parish communications via e-mail)
Baptized: Yes No First Communion: Yes No Confirmed: Yes No First Penance: Yes No
Married: Yes No Date: _____

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Divorced/Separated Widowed Other (specify) _____
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