



New Parishioner Registration Form

Family Information

Male Head of Household (If Applicable):

Name: _____

First _____ Middle _____ Last _____

Birth Date (Month/Day Year): _____ / _____ / _____

Religion: _____

Race: _____

Employment & Occupation: _____

Sacraments (Please fill information for all Sacraments received):

Baptism:

Date (M/D/Y) _____ Parish _____ City & State _____

Reconciliation:

Date (M/D/Y) _____ Parish _____ City & State _____

First Holy Communion:

Date (M/D/Y) _____ Parish _____ City & State _____

Confirmation:

Date (M/D/Y) _____ Parish _____ City & State _____

Female Head of Household (If Applicable):

Title (Dr., Miss, Mrs., etc.):

Name:

| | | | |
|--------------|---------------|-------------|---------------|
| First | Middle | Last | Maiden |
|--------------|---------------|-------------|---------------|

Birth Date (Month/Day Year): _____ / _____ / _____

Religion: _____

Race: _____

Employment & Occupation: _____

Sacraments (Please fill information for all Sacraments received):

Baptism:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Reconciliation:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

First Holy Communion:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Confirmation:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Marital Status

Please Circle: **Single** **Catholic Marriage** **Civil Marriage** **Widowed** **Divorced**

Date **Place of Marriage:**

Officiant (Name and Title)

Children (Under 18)

Child #1

Name: _____

Birth Date (Month/Day Year): _____ / _____ / _____

Religion: _____

Race: _____

Sacraments (Please fill information for all Sacraments received):

Baptism:

Date (M/D/Y)

Reconciliation:

Date (M/D/Y)

First Holy Communion:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Confirmation:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Name of School:

Grade:

Child #2

Name:

| | | |
|--------------|---------------|-------------|
| First | Middle | Last |
|--------------|---------------|-------------|

Birth Date (Month/Day Year): _____/_____/_____

Religion: _____

Race: _____

Sacraments (Please fill information for all Sacraments received):

Baptism:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Reconciliation:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

First Holy Communion:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Confirmation:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Name of School:

Grade:

Child #3

Name:

| | | |
|--------------|---------------|-------------|
| First | Middle | Last |
|--------------|---------------|-------------|

Birth Date (Month/Day Year): _____ / _____ / _____

Religion: _____

Race: _____

Sacraments (Please fill information for all Sacraments received):

Baptism:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Reconciliation:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

First Holy Communion:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Confirmation:

| | | |
|---------------------|---------------|-------------------------|
| Date (M/D/Y) | Parish | City & State |
|---------------------|---------------|-------------------------|

Name of School:

Grade:

****Please contact office to provide information for additional children****

Office Use Only:

Welcome Packet _____ Envelopes _____ CSA _____ Envelope # _____