

Holy Cross Catholic Church Parish Registration Form

Family Name _____

Mr. Mrs. Ms. Miss Mr./Mrs.

Mailing Address

_____ City _____ State _____ Zip _____

Physical Address (if different)

_____ City _____ State _____ Zip _____

Phone-Home _____ Cell _____ email _____

Member Information

Head of House Hold

Name _____ Birthdate ____/____/____
Last, First, Middle 00/00/0000

Male Female

Religion _____

Baptized Yes No

Location _____

1st Comm Yes No

Location _____

Confirmed Yes No

Location _____

Spouse

Name _____ Birthdate ____/____/____
Last, First, Middle 00/00/0000

Male Female

Religion _____

Baptized Yes No

Location _____

1st Comm Yes No

Location _____

Confirmed Yes No

Location _____

Maiden Name _____

Marital Status Catholic Marriage Protestant Marriage Civil Marriage
 Single Widowed Divorced Separated

Marriage Date ____/____/____
00/00/0000

Location _____

Former Parish: _____ City _____ State _____

Member Information

List all dependents below

Name _____ <i>Last, First, Middle</i>	Birthdate _____/_____/_____ 00/00/0000
<input type="radio"/> Male <input type="radio"/> Female	Grade _____
Religion _____	
Baptized <input type="radio"/> Yes <input type="radio"/> No	Location _____
1 st Comm <input type="radio"/> Yes <input type="radio"/> No	Location _____
Confirmed <input type="radio"/> Yes <input type="radio"/> No	Location _____

Name _____ <i>Last, First, Middle</i>	Birthdate _____/_____/_____ 00/00/0000
<input type="radio"/> Male <input type="radio"/> Female	Grade _____
Religion _____	
Baptized <input type="radio"/> Yes <input type="radio"/> No	Location _____
1 st Comm <input type="radio"/> Yes <input type="radio"/> No	Location _____
Confirmed <input type="radio"/> Yes <input type="radio"/> No	Location _____

Name _____ <i>Last, First, Middle</i>	Birthdate _____/_____/_____ 00/00/0000
<input type="radio"/> Male <input type="radio"/> Female	Grade _____
Religion _____	
Baptized <input type="radio"/> Yes <input type="radio"/> No	Location _____
1 st Comm <input type="radio"/> Yes <input type="radio"/> No	Location _____
Confirmed <input type="radio"/> Yes <input type="radio"/> No	Location _____

Name _____ <i>Last, First, Middle</i>	Birthdate _____/_____/_____ 00/00/0000
<input type="radio"/> Male <input type="radio"/> Female	Grade _____
Religion _____	
Baptized <input type="radio"/> Yes <input type="radio"/> No	Location _____
1 st Comm <input type="radio"/> Yes <input type="radio"/> No	Location _____
Confirmed <input type="radio"/> Yes <input type="radio"/> No	Location _____

Name _____ <i>Last, First, Middle</i>	Birthdate _____/_____/_____ 00/00/0000
<input type="radio"/> Male <input type="radio"/> Female	Grade _____
Religion _____	
Baptized <input type="radio"/> Yes <input type="radio"/> No	Location _____
1 st Comm <input type="radio"/> Yes <input type="radio"/> No	Location _____
Confirmed <input type="radio"/> Yes <input type="radio"/> No	Location _____

Office Use Only

Envelope Number # _____

Date Received _____/_____/_____