

- NEW
 UPDATED

Family Registration Form

ENVELOPE # _____

DATE: _____

1. LAST NAME: _____
2. ADDRESS: _____
3. CITY: _____ ZIP CODE: _____ PHONE #: _____
4. RESIDENCE: OWN _____ RENT _____ Do you plan on residing there for at least 5 years? _____
5. MASS ATTENDANCE: DAILY _____ WEEKLY _____ OTHER: _____
6. E-MAIL ADDRESS: _____

7. ADULT MALE: Please name even if non-Catholic:

Last Name	First Name	Date of Birth
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SINGLE MARRIED DIVORCED WIDOWED (please circle)

BAPTIZED: YES NO WHERE: _____

CONFIRMED: YES NO WHERE: _____

EMPLOYED: YES NO OCCUP.: _____

RETIRED: YES NO DISABILITY: YES NO

(TYPE) _____

8. ADULT FEMALE: Please name even if non-Catholic:

Maiden Name	First Name	Date of Birth
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SINGLE MARRIED DIVORCED WIDOWED (please circle)

BAPTIZED: YES NO WHERE: _____

CONFIRMED: YES NO WHERE: _____

EMPLOYED: YES NO OCCUP.: _____

RETIRED: YES NO DISABILITY: YES NO (TYPE) _____

9. MARRIED BY: PRIEST MINISTER JUSTICE OTHER (specify) _____
 DATE OF MARRIAGE: _____ WHERE: _____

10. CHILDREN LIVING AT HOME:

Last Name	First Name	Date of Birth
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MALE FEMALE (please circle)

BAPTIZED: YES NO WHERE: _____

CONFIRMED: YES NO WHERE: _____

SCHOOL ATTENDING OR OCCUPATION: _____

CHILDREN LIVING AT HOME:

Last Name	First Name	Date of Birth
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MALE FEMALE (please circle)

BAPTIZED: YES NO WHERE: _____

CONFIRMED: YES NO WHERE: _____

SCHOOL ATTENDING OR OCCUPATION: _____

CHILDREN LIVING AT HOME:

Last Name	First Name	Date of Birth
MALE	FEMALE (please circle)	
BAPTIZED: YES NO WHERE: _____		
CONFIRMED: YES NO WHERE: _____		
SCHOOL ATTENDING OR OCCUPATION: _____		

CHILDREN LIVING AT HOME:

Last Name	First Name	Date of Birth
MALE	FEMALE (please circle)	
BAPTIZED: YES NO WHERE: _____		
CONFIRMED: YES NO WHERE: _____		
SCHOOL ATTENDING OR OCCUPATION: _____		

CHILDREN LIVING AT HOME:

Last Name	First Name	Date of Birth
MALE	FEMALE (please circle)	
BAPTIZED: YES NO WHERE: _____		
CONFIRMED: YES NO WHERE: _____		
SCHOOL ATTENDING OR OCCUPATION: _____		

11. ADULTS LIVING IN YOUR CARE:

Last Name	First Name	Date of Birth
MALE	FEMALE (please circle)	RELATIONSHIP: _____
BAPTIZED: YES NO WHERE: _____		
CONFIRMED: YES NO WHERE: _____		
OCCUPATION OR RETIRED: _____		
SHUT-IN: YES NO IF YES, HOME COMMUNION REQUESTED: YES NO		

- 12. Do any of your children attend Notre Dame Academy: YES NO
- 13. Will any of your children attend Notre Dame Academy within the next five years? YES NO YEAR _____
- 14. Do any of your children attend a Religious Education Program? YES NO WHERE: _____
- 15. Suggestions for improvement of parish life: _____

16. What skills can you share with the parish? _____

- 17. Areas of interest: (please circle)
 Lector Eucharistic Minister Usher Choir Altar Server
 Fundraising Committee Liturgy Committee Other: _____