# St. Mary - Our Lady of Mt. Carmel Catholic Church Parish Registration

#### **Family Information Form**

ID/Env #:		
Date Registered:	Former Parish:	
FAMILY NAME:		
Head of Household:		
Last Name:	First Name:	
Title:	Suffix:	
Spouse: (or N/A)		
Last Name:	First Name:	
Title:	Suffix:	
FAMILY HOME ADDRESS:		
Street Address Line 1:		<del></del>
Street Address Line 2:		
City:	State: Zip Code:	
Home Phone Number:	Unlisted: Yes/No	

#### **Instructions:**

Please fill out one Member Registration form for each individual living in your household including yourself along with the Family Information Form.

MEMBER DETAIL:		
Last Name:		
First Name:	Middle Name:	
Nickname:	Maiden Name:	
Gender: Male/Female Bi	rth Date: Religion:	
Marital Status:	Occupation:	
Grade:	School Attending:	
Phone Number:	Home/Office/Cell/Other	Unlisted: Yes/No
Phone Number:	Home/Office/Cell/Other	Unlisted: Yes/No
Email:		
MEMBER SACRAMENTS:		
Birthplace: City/State		
Father's Name:		
BAPTISM:		
Date:		
FIRST COMMUNION:		
Date:		

<b>CONFIRMATION:</b>	
Date:	
Church Name:	
MARRIAGE:	
Date:	
Church Name:	

MEMBER DETAIL:		
Last Name:		
First Name:	Middle Name:	
Nickname:	Maiden Name:	
Gender: Male/Female Bi	rth Date: Religion:	
Marital Status:	Occupation:	
Grade:	School Attending:	
Phone Number:	Home/Office/Cell/Other	Unlisted: Yes/No
Phone Number:	Home/Office/Cell/Other	Unlisted: Yes/No
Email:		
MEMBER SACRAMENTS:		
Birthplace: City/State		
Father's Name:		
BAPTISM:		
Date:		
FIRST COMMUNION:		
Date:		

<b>CONFIRMATION:</b>	
Date:	
Church Name:	
MARRIAGE:	
Date:	
Church Name:	

MEMBER DETAIL:		
Last Name:		
First Name:	Middle Name:	
Nickname:	Maiden Name:	
Gender: Male/Female Bi	rth Date: Religion:	
Marital Status:	Occupation:	
Grade:	School Attending:	
Phone Number:	Home/Office/Cell/Other	Unlisted: Yes/No
Phone Number:	Home/Office/Cell/Other	Unlisted: Yes/No
Email:		
MEMBER SACRAMENTS:		
Birthplace: City/State		
Father's Name:		
BAPTISM:		
Date:		
FIRST COMMUNION:		
Date:		

<b>CONFIRMATION:</b>	
Date:	
Church Name:	
MARRIAGE:	
Date:	
Church Name:	

MEMBER DETAIL:		
Last Name:		
First Name:	Middle Name:	
Nickname:	Maiden Name:	
Gender: Male/Female Bi	rth Date: Religion:	
Marital Status:	Occupation:	
Grade:	School Attending:	
Phone Number:	Home/Office/Cell/Other	Unlisted: Yes/No
Phone Number:	Home/Office/Cell/Other	Unlisted: Yes/No
Email:		
MEMBER SACRAMENTS:		
Birthplace: City/State		
Father's Name:		
BAPTISM:		
Date:		
FIRST COMMUNION:		
Date:		

<b>CONFIRMATION:</b>	
Date:	
Church Name:	
MARRIAGE:	
Date:	
Church Name:	