PARISH INFORMATION FORM

| FAMILY LAST NAME: | | |
|--|---|----------------------------------|
| ADDRESS: | | (Street/City/Zip) |
| HOME PHONE: | _ CELL PHONE: | |
| E-MAIL | | |
| HEAD OF HOUSEHOLD NAME: (First, | Middle) | |
| DATE of BIRTH | CITY of BIRTH | |
| RELIGION | BAPTIZED 1 st COM | IMUNION CONFIRMED |
| EDUCATION: | | |
| EMPLOYER: | OCCUPATION | |
| PHONE: | | |
| ☐ Single ☐ Separated ☐ D | Divorced Widowed Married | (if yes, complete the following) |
| ☐ Valid in the Catholic church | DATE of MARRIAGE | |
| WHERE: (Name of Church & City/ | 'State) | |
| SPOUSE NAME: (First. Middle) | | (Include Maiden Name) |
| | CITY of BIRTH | |
| RELIGION | BAPTIZED 1 st COMI | MUNION CONFIRMED |
| EDUCATION: | | |
| EMPLOYER: | OCCUPATION | |
| PHONE: | | |
| | | |
| | DEPENDENT CHILDREN | |
| | se indicate if child is being home-scl | , |
| | 's sacrament date(s) is unknown – if possible | |
| CHILD'S NAME (First/Middle): | | • |
| | | |
| | | |
| | 1 | |
| | | CDADE (Company) |
| | | GRADE (Current) |
| CHILD'S NAME (First/Middle): | | |
| | | |
| | | |
| | | |
| CONFIRMATION: DATE: | CHURCH/City/State: | |
| SCHOOL: | | GRADE (Current) |

| CHILD'S NAME (First/Middle): | (Include last name if different) |
|---|---|
| | N (City) |
| | JRCH/CITY: |
| | CHURCH/City/State |
| | CHURCH/City/State: |
| | GRADE (Current) |
| | (Include last name if different) |
| | N (City) |
| 5-11-10-11-11-11-11-11-11-11-11-11-11-11- | JRCH/CITY: |
| | RCH/City/State: |
| | CHURCH/City/State |
| | CHURCH/City/State: |
| | GRADE (Current) |
| | (Include last name if different) |
| | V (City) |
| | RCH/City/State: |
| | CHURCH/City/State |
| | CHURCH/City/State: |
| | GRADE (Current) |
| | |
| | (Include last name if different) |
| | V (City) |
| | RCH/City/State: |
| | CHURCH/City/State |
| CONFIRMATION: DATE: | CHURCH/City/State: |
| SCHOOL: | GRADE (Current) |
| Talents: I/we would like to volunteer for the follow | ving skills: |
| | Please note name and talent (e.g., music) |
| Beiling to valuation for the following | owing ministries: |
| Ministries: I/we would like to volunteer for the foil | owing ministries: Please note name and ministry(ies) |
| | |
| Examples: Funeral Luncheon (calling, serving, providing food) | |
| Church Cleaning | Song Leader/Musician |
| CCD Instructor | Altar Server |
| Church Grounds | Usher/Greeter |
| Lector | Funeral Luncheon (calling, serving, food provider) |
| Eucharistic Minister | Other |