

OUR LADY OF LOURDES PARISH REGISTRATION FORM

DATE OF REGISTRATION _____

FAMILY LAST NAME _____

HOME PHONE _____

STREET/P.O BOX # _____ CITY _____ STATE _____ ZIPCODE _____

MEMBER TYPE	HEAD OF HOUSEHOLD	SPOUSE	CHILD 1	CHILD 2	CHILD 3	CHILD 4
FIRST NAME						
PREFERRED NAME						
MIDDLE NAME (FULL)						
(MAIDEN) & LAST NAME						
TITLE	Mr / Mrs / Ms / Miss / Dr	Mr / Mrs / Ms / Miss / Dr	Mr / Miss	Mr / Miss	Mr / Miss	Mr / Miss
CELL PHONE						
EMAIL						
MARITAL STATUS			Not Applicable	Not Applicable	Not Applicable	Not Applicable
DATE OF BIRTH	/ /	/ /	/ /	/ /	/ /	/ /
CITY/STATE OF BIRTH						
GENDER	Male / Female	Male / Female	Male / Female	Male / Female	Male / Female	Male / Female
RELIGION						
PRACTICING FAITH	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
STATUS: Active, In-Active, or Non-Catholic						
BAPTISM	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
DATE	/ /	/ /	/ /	/ /	/ /	/ /
CHURCH NAME OF BAPTISM						
CITY/STATE OF BAPTISM						
CONVERT	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
FIRST COMMUNION	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
DATE	/ /	/ /	/ /	/ /	/ /	/ /
CHURCH NAME OF FIRST COMMUNION						
CITY/STATE OF FIRST COMMUNION						
CONFIRMED	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
DATE	/ /	/ /	/ /	/ /	/ /	/ /
CHURCH NAME OF CONFIRMATION						
CITY/STATE OF CONFIRMATION						

more on other side

MEMBER TYPE	HEAD OF HOUSEHOLD	SPOUSE	CHILD 1	CHILD 2	CHILD 3	CHILD 4
CHILDS SCHOOL & GRADE	Not Applicable					
MARRIAGE DATE	/	/	Not Applicable	Not Applicable	Not Applicable	Not Applicable
CHURCH NAME OF MARRIAGE			Not Applicable	Not Applicable	Not Applicable	Not Applicable
CITY/STATE OF MARRIAGE			Not Applicable	Not Applicable	Not Applicable	Not Applicable
MARRIED IN THE CATHOLIC CHURCH	YES	NO	Not Applicable	Not Applicable	Not Applicable	Not Applicable
MARRIAGE CONVALIDATION DATE (if applicable)	/	/	Not Applicable	Not Applicable	Not Applicable	Not Applicable
CONVALIDATION CHURCH NAME (if applicable)			Not Applicable	Not Applicable	Not Applicable	Not Applicable
CONVALIDATION CITY/STATE (if applicable)			Not Applicable	Not Applicable	Not Applicable	Not Applicable
OCCUPATION			Not Applicable	Not Applicable	Not Applicable	Not Applicable
EMPLOYER			Not Applicable	Not Applicable	Not Applicable	Not Applicable
WORK PHONE			Not Applicable	Not Applicable	Not Applicable	Not Applicable
Are you Retired?	YES	NO	YES	NO	Not Applicable	Not Applicable
Are you Homebound?	YES	NO	YES	NO	Not Applicable	Not Applicable

Former Parish Name

Former Parish City & State

If you/your family have already been attending Our Lady of Lourdes, which weekend mass(es) have you been attending?

Circle: Sat. 5:30pm Sun. 7:00am Sun. 8:30am Sun. 10:00am Sun. 11:30am

Additional NOTES: Special needs, talents, ecetera?

***ADULT CHILDREN SHOULD REGISTER SEPARATELY IN THEIR RESPECTIVE PARISH**

CW _____ CM _____ OSV # _____ assigned date _____

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