

HOLY SPIRIT PARISH - REGISTRATION FORM (revised 4/2007)

Date _____

FAMILY NAME _____

Title Mr./Mrs. Mr. Mrs. Ms Miss Dr.

Phone Number _____ listed unlisted

Previous Parish _____

Email address to best reach the family _____

Address _____ Apt # _____ City _____ Zip _____

OFFERING ENVELOPES Weekly *or* Monthly *or* None *(Offering Envelopes are suggested as the IRS requires a record of your contributions.)*

FIRST NAME	<i>Religion</i>	<i>Baptism</i>	<i>1st Communion</i>	<i>Confirmation</i>	Occupation/Employer	Work Phone
Husband		Y / N	Y / N	Y / N		
Wife _____ Maiden Name (_____)		Y / N	Y / N	Y / N		
Single		Y / N	Y / N	Y / N		
Other Adults living in Household		Y / N	Y / N	Y / N		
		Y / N	Y / N	Y / N		

	<i>School attending</i>	<i>Grade</i>	<i>Date of Birth</i>
Child 1 boy/girl	Y / N	Y / N	Y / N
Child 2 boy/girl	Y / N	Y / N	Y / N
Child 3 boy/girl	Y / N	Y / N	Y / N
Child 4 boy/girl	Y / N	Y / N	Y / N
Child 5 boy/girl	Y / N	Y / N	Y / N
Other Children living in Household	Y / N	Y / N	Y / N

Number of children attending a Catechetical Program: _____ Where: _____