

Holy Family Catholic Church Registration Form

(All information is Confidential, for Church use only)

Please print.

Title: Mr. _____ Mrs. _____ Ms. _____ Mr. & Mrs. _____ Other: _____

Last Name: _____ First Name: _____

Spouse's Last Name: _____ Spouse's First Name: _____

Mailing Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-Mail: _____

Marital Status: Single: _____ Engaged: _____ Married: _____ Widowed: _____ Separated: _____ Divorced: _____

Where you married by a Catholic priest or deacon? Yes: _____ No: _____

Stewardship of Time & Talent

Please contact me about these ministries:

Stewardship of Treasure

In prayerful thanksgiving for God's many blessings, I/We hereby commit to contribute to the support of HFC's ministries. \$ _____ per Week/Monthly

Office Use Only

Date Registered: _____ Family No. _____ Envelope No. _____ Vol. Info. _____

Vol. Info Processed: _____ Reg. Processed by: _____

	Head of Household	Head of Household II	Info. Family Member	Info. Family Member	Info. Family Member	Info. Family Member
Name						
Gender						
Date of Birth						
Religious Affiliation						
Employer						
Occupation						
Work Phone						
School/Grade						
Languages						
Baptism						
Reconciliation						
Confirmation						
Marriage						
Disability/Shut In						