Holy Family Parish Catholic Church Family Registration Form

Thank you for joining our Parish Family. Please help us get to know you better by completing this form.

Family Information

Full Names- Ms./Mrs.:Maiden	Mr.:
DOB:	DOB:
Occupation:	_ Occupation:
Catholic YesNo	Catholic YesNo
Email Address:	Email Address:
Marital Status: () Married in Catholic Church? [Y / N] Custodial Parent: Mother or Father or n/a?	
Street Address:	
City and Zip:	
Cell Phone Numbers: Mother ()	Father ()
Emergency Contact Name and Phone #:	()
	Have your child(ren) received the following Sacraments in the Catholic Church? See below: 🖤
Child's Name D.O.B. Sex Grade School Name Baptism/1st Comm./Confirmation? 1.	
Any medical conditions or dietary restrictions for your child(ren)? No () YES!	
Do you need any sacrament instruction for your child(ren) this school year? (See note below)	
NO () My child(ren) do not require any sacram	
YES () I need for my	child
(Sacrament)	(Child's Name)
YES () I need for my	child
(Sacrament)	(Child's Name)
YES () I need for my	child
(Sacrament)	(Child's Name)
Note: First Reconciliation and First Eucharist are usually received in the 2 nd grade; Confirmation in the 11 th grade.	
DATE	