

ST. MARGARET MARY PARISH NEW REGISTRATION FORM

Family Name: _____

Address: _____

Phone: (H) _____ (W) _____ (C) _____

Email: _____

First Adult Member: _____

Date of Birth: _____ City of Birth: _____

Maiden Name (if applicable) _____

Religion: _____

Sacraments (Please circle):

Baptism: Yes No

Church & City/State _____

Confirmation: Yes No

Church & City/State _____

Marriage: Yes No

Performed by Priest or Deacon: Yes No

Place of Marriage: _____

Date of Marriage: _____

Had you been married previously? Yes No

Has the marriage been annulled? Yes No

Ethnicity: _____ Language(s) Spoken: _____

School/college background: _____

Occupation: _____ Place of Employment: _____

Special Needs: _____

Second Adult Member: _____

Date of Birth: _____ City of Birth: _____

Maiden Name (if applicable): _____

Religion: _____

Sacraments (Please circle):

Baptism: Yes No

Church & City/State: _____

Confirmation: Yes No

Church & City/State: _____

Marriage: Yes No

Performed by Priest or Deacon: Yes No

Place of Marriage: _____

Date of Marriage: _____

Have you been married before? Yes No

Has the marriage been annulled? Yes No

Ethnicity: _____ Language(s) Spoken: _____

School/college background: _____

Occupation: _____ Place of Employment: _____

Special Needs: _____

Child Name: _____ **M** **F**

Place of birth: _____ Date of Birth: _____

Religion: _____

Sacraments:

Baptism: Yes No

Place: _____

Confirmation: Yes No

Place: _____

Marriage: Yes No

Ethnicity: _____ Language(s) Spoken: _____

School/college background: _____

Special Needs: _____

Child Name: _____ **M** **F**

Place of birth: _____ Date of Birth: _____

Religion: _____

Sacraments:

Baptism: Yes No

Place: _____

Confirmation: Yes No

Place: _____

Marriage: Yes No

Ethnicity: _____ Language(s) Spoken: _____

School/college background: _____

Special Needs: _____

Child Name: _____ **M** **F**

Place of birth: _____ Date of Birth: _____

Religion: _____

Sacraments:

Baptism: Yes No

Place: _____

Confirmation: Yes No

Place: _____

Marriage: Yes No

Ethnicity: _____ Language(s) Spoken: _____

School/college background: _____

Special Needs: _____

Child Name: _____ **M** **F**

Place of birth: _____ Date of Birth: _____

Religion: _____

Sacraments:

Baptism: Yes No

Place: _____

Confirmation: Yes No

Place: _____

Marriage: Yes No

Ethnicity: _____ Language(s) Spoken: _____

School/college background: _____

Special Needs: _____