## ST. GREGORY PARISH REGISTRATION FORM

FAMILY NAME:	AME:		FIRST NAME				SPOUSE					
TITLE: Mr. & Mrs. I Widowed	Mr. Mrs.	Ms.	Miss	Dr. & Mrs.	MARITA	AL STATUS:	Church Marriag	ge Marri	age Single	Divorced	Separated	
STREET ADDRESS No						P.O	. BOX		CONTRIBU	JTION EN	VELOPES	Yes
CITY/STATENo				ZIP (	CODE		PHONE (			UN	LISTED:	Yes
FORMER PARISH				CITY	/STATE		EM	AIL				
MEMBER INFORMATION												

	Н	EAD	SPO	OUSE	CH	IILD	CI	HILD	CF	HILD	CF	IILD
First Name												
Last Name if												
different and/or												
Maiden Name of												
Spouse												
Marital Status												
D. II. I												
Religion												
Handicap												
Occupation												
Employer/												
Location												
<b>Business Phone &amp;</b>												
Ext. #												
Grade												
School												
Sex	Male	Female										

## MEMBER INFORMATION CONTINUED

## Instructions

Please circle the corresponding letter for each sacrament. Enter date and place, if applicable, for each sacrament received.

(Y)-Received Sacrament (N)-Have Not Received Sacrament (H)-Received Sacrament At This Parish (U)-Unsure If Sacrament Was Received

	HEAD	SPOUSE	CHILD	CHILD	CHILD	CHILD
	(NAME)	(NAME)	(NAME)	(NAME)	(NAME)	(NAME)
Birth Date						
Baptism Date Place	(Y) (N) (H) (U)					
First Communion Date	(Y) (N) (H) (U)					
Confirmation Date	(Y) (N) (H) (U)					
Marriage Date	(Y) (N) (H) (U)					
Ministries/Talents Would Like to Volunteer For						
Ministries/Talents Would Like to Volunteer For						