

Please read first.
PRINT all answers.
Answer all questions.

Drop in Sunday collection
OR mail to church office
59 Main Street
Millbury, MA 01527

THE CATHOLIC PARISHES OF MILLBURY

REGISTRATION FORM

(PLEASE CHECK ONE) ST. BRIGID _____ ASSUMPTION _____

Family Surname _____ Date _____

Mailing Address (incl. town and zip code) _____

Street Address – if different (incl. town and zip code) _____

Home Phone _____

ADULT/SPOUSE/HUSBAND

Full Name (include Mr., Mrs., Miss, or Ms. AND middle name) _____

Birth Date _____

Cell Phone _____ EMAIL _____

Occupation _____

Employer _____

Workplace Phone _____

Highest School Grade Completed _____

RELIGION _____

Marital Status (circle one) Single Separated Married Divorced Widowed

Date of Catholic Marriage _____

Catholic Sacraments Celebrated:

Baptism – Date, Church and Town (if known) _____

Communion Reconciliation/Confession

Confirmation – Date, Church and Town (if known) _____

ADULT/SPOUSE/WIFE

Full Name (include Mr., Mrs., Miss, or Ms. AND middle name) _____

Birth Date _____

Cell Phone _____ EMAIL _____

Occupation _____

Employer _____

Workplace phone _____

Highest School Grade Completed _____

RELIGION _____

Marital Status (circle one) Single Separated Married Divorced Widowed

Date of Catholic Marriage _____

Maiden Name _____

Catholic Sacraments Celebrated:

Baptism – Date, Church and Town (if known) _____

Communion Reconciliation/Confession

Confirmation – Date, Church and Town (if known) _____

CHILDREN

Full Name (incl. middle) _____ Gender _____ BIRTHDATE _____

Grade and school _____

Catholic Sacraments Celebrated:

Baptism – Date, Church and Town (if known) _____

Communion Reconciliation/Confession

Confirmation – Date, Church and Town (if known) _____

Full Name (incl. middle) _____ Gender _____ BIRTHDATE _____

Grade and School _____

Catholic Sacraments Celebrated:

Baptism - Date, Church and Town (if known) _____

Communion Reconciliation/Confession

Confirmation - Date, Church and Town (if known) _____

Full Name (incl. middle) _____ Gender _____ BIRTHDATE _____

Grade and School _____

Catholic Sacraments Celebrated:

Baptism – Date, Church and Town (if known) _____

Communion Reconciliation/Confession

Confirmation – Date, Church and Town (if known) _____

Full Name (incl. middle) _____ Gender _____ BIRTHDATE _____

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