

Family Name (Husband)_____

Wife last name (same) or _____

Envelope Number_____

Family Email Address_____

Marriage Date:_____

Married by Priest/Deacon Y/N_____

City/State_____

Parish_____

	Home Address	Mailing Address
Street		
Apt Number		
City		
State		
Zip Code		
Phone		

Permission to add in Parish Directory?				Phone - Y/N			Address - Y/N			Email - Y/N				
	First Name	MI	Marital Status - S, M, W, D, Sep	DOB	Sex	Baptism	Reconciliation	Confirm.	RCIA - Y/N	Time/Talent (L) Lector; E(Eucharistic Minister), (C) CCD (O) Other - Specify	Special Needs Y/N	Want Visitor? Y/N	Education HS/Bach/Masters/Other	Occupation
Husband/Head of Household														
Wife-Include Maiden Name														
Child 1														
Child 2														
Child 3														
Child 4														

Please add the sacramental dates and location if known, otherwise Y, N or NA