



2021 PARISH REGISTRATION

The information provided below is considered CONFIDENTIAL and is used only for communication purposes by the office. Please put in an envelope and place in the collection basket or return by mail to the parish office.

Please Print

Today's Date: \_\_\_\_\_

Mark all sacraments received, give the year of the sacrament if you don't know the date. Please complete Church and City information

Mailing Address: (Please print all information and fill out as you wish mail addressed to you) (ie M/M first name, last name)

Family Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Unlisted ( )

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you new to the area ( ) Yes ( ) No Transferring from \_\_\_\_\_ (Name of Parish and City)

Head of Household Information: Religion: \_\_\_\_\_ Ethnicity: \_\_\_\_\_ Language: \_\_\_\_\_

Name \_\_\_\_\_ Sex: ( ) M ( ) F Date of Birth \_\_\_\_\_ (xx/xx/xxxx) preferred name

Cell Phone # \_\_\_\_\_ Text # \_\_\_\_\_ Email \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Note: Please give year of sacrament if you don't know the date. Please complete Church and City information

Marital Status: Married in the Catholic Church ( ) Civil ( ) Other: \_\_\_\_\_ Maiden Name \_\_\_\_\_

Single ( ) Widower ( ) Divorced ( ) Annulled ( ) - Annulment Date \_\_\_\_\_

Marriage Date: \_\_\_\_\_ Church \_\_\_\_\_ City \_\_\_\_\_

Baptism ( ) Convert ( ) First Confession ( ) Eucharist: ( ) Confirmation: ( )

Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date \_\_\_\_\_

Church: \_\_\_\_\_ Church: \_\_\_\_\_ Church: \_\_\_\_\_ Church \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_ City: \_\_\_\_\_ City \_\_\_\_\_

You will be automatically registered as a parishioner to our online communication and parish directory in "REALM". To opt out of text messages check here ( ). To facility communications to our parishioners please provide primary email address. If you unsubscribe to email; parish events and news will not come to you.

Spouse Information: Religion: \_\_\_\_\_ Ethnicity: \_\_\_\_\_ Language: \_\_\_\_\_

Name \_\_\_\_\_ Sex: ( ) M ( ) F Date of Birth \_\_\_\_\_ (xx/xx/xxxx) preferred name

Cell Phone # \_\_\_\_\_ Text # \_\_\_\_\_ Email \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Note: Please give year of sacrament if you don't know the date. Please complete Church and City information

Marital Status: Married in the Catholic Church ( ) Civil ( ) Other ( ) \_\_\_\_\_ Maiden Name \_\_\_\_\_

Single ( ) Widower ( ) Divorced ( ) Annulled ( ) Annulment Date: \_\_\_\_\_

Marriage Date: \_\_\_\_\_ Church \_\_\_\_\_ City \_\_\_\_\_

Baptism ( ) Convert ( ) First Confession ( ) Eucharist: ( ) Confirmation: ( )

Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Date \_\_\_\_\_

Church: \_\_\_\_\_ Church: \_\_\_\_\_ Church: \_\_\_\_\_ Church \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_ City: \_\_\_\_\_ City \_\_\_\_\_

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## 2021 PARISH REGISTRATION

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**Please Print**

**Anyone living with you over the age of 18 years old? Please provide name and relationship.**

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***Please use a new form to register these individuals as parishioners at St. Mary Cathedral (if they are away at college and still living at home please complete the child form)***

**Does any member or your household have a disability?**

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List Name and Disability

List Name and Disability

**Do you have any needs that the parish is not meeting?**

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**Do you need to talk to a priest ( ) Yes ( ) No**

## 2021 PARISH REGISTRATION

*The information provided below is considered CONFIDENTIAL and is used only for communication purposes by the office.*

**1<sup>st</sup> child (Children living at home or away at College, if 18 years or older and not at college please register as a Parishioner)**

Name \_\_\_\_\_ Sex: ( ) M ( ) F Date of Birth \_\_\_\_\_  
First, Middle, Last Preferred Name (xx/xx)

Grade in School \_\_\_\_\_ Attending Religious Education ( ) Yes ( ) No Grade \_\_\_\_\_  
 School attending \_\_\_\_\_ Interested in more information on Religious Education ( ) Yes ( ) No

Religion: Catholic: ( ) Other: \_\_\_\_\_

**Mark all sacraments received, give the year of the sacrament if you don't know the date. Please complete Church and City information.**

<b>Baptism ( ) Convert ( )</b>	<b>First Confession ( )</b>	<b>Eucharist: ( )</b>	<b>Confirmation: ( )</b>
Date: _____	Date: _____	Date: _____	Date _____
Church: _____	Church: _____	Church: _____	Church _____
City: _____	City: _____	City: _____	City _____

**2<sup>nd</sup> child**

Name \_\_\_\_\_ Sex: ( ) M ( ) F Date of Birth \_\_\_\_\_  
First, Middle, Last Preferred Name (xx/xx/xxxx)

Grade in School \_\_\_\_\_ Attending Religious Education ( ) Yes ( ) No Grade \_\_\_\_\_  
 School attending \_\_\_\_\_ Interested in more information on Religious Education ( ) Yes ( ) No

Religion: Catholic: ( ) Other: \_\_\_\_\_

**Mark all sacraments received, give the year of the sacrament if you don't know the date. Please complete Church and City information.**

<b>Baptism ( ) Convert ( )</b>	<b>First Confession ( )</b>	<b>Eucharist: ( )</b>	<b>Confirmation: ( )</b>
Date : _____	Date: _____	Date: _____	Date _____
Church: _____	Church: _____	Church: _____	Church _____
City: _____	City: _____	City: _____	City _____

**3<sup>rd</sup> Child**

Name \_\_\_\_\_ Sex: ( ) M ( ) F Date of Birth \_\_\_\_\_  
First, Middle, Last Preferred Name (xx/xx/xxxx)

Grade in School \_\_\_\_\_ Attending Religious Education ( ) Yes ( ) No Grade \_\_\_\_\_  
 School attending \_\_\_\_\_ Interested in more information on Religious Education ( ) Yes ( ) No

Religion: Catholic: ( ) Other: \_\_\_\_\_

**Mark all sacraments received, give the year of the sacrament if you don't know the date. Please complete Church and City information.**

<b>Baptism ( ) Convert ( )</b>	<b>First Confession ( )</b>	<b>Eucharist: ( )</b>	<b>Confirmation: ( )</b>
Date: _____	Date: _____	Date: _____	Date _____
Church: _____	Church: _____	Church: _____	Church _____
City: _____	City: _____	City: _____	City _____

## 2021 PARISH REGISTRATION

*The information provided below is considered CONFIDENTIAL and is used only for communication purposes by the office.*

### 4th child

Name \_\_\_\_\_ Sex: ( ) M ( ) F Date of Birth \_\_\_\_\_  
First, Middle, Last Preferred Name (xx/xx)

Grade in School \_\_\_\_\_ Attending Religious Education ( ) Yes ( ) No Grade \_\_\_\_\_

School attending \_\_\_\_\_ Interested in more information on Religious Education ( ) Yes ( ) No

Religion: Catholic: ( ) Other: \_\_\_\_\_

**Mark all sacraments received, give the year of the sacrament if you don't know the date. Please complete Church and City information.**

<b>Baptism ( ) Convert ( )</b>	<b>First Confession ( )</b>	<b>Eucharist: ( )</b>	<b>Confirmation: ( )</b>
Date: _____	Date: _____	Date: _____	Date _____
Church: _____	Church: _____	Church: _____	Church _____
City: _____	City: _____	City: _____	City _____

### 5th child

Name \_\_\_\_\_ Sex: ( ) M ( ) F Date of Birth \_\_\_\_\_  
First, Middle, Last Preferred Name (xx/xx/xxxx)

Grade in School \_\_\_\_\_ Attending Religious Education ( ) Yes ( ) No Grade \_\_\_\_\_

School attending \_\_\_\_\_ Interested in more information on Religious Education ( ) Yes ( ) No

Religion: Catholic: ( ) Other: \_\_\_\_\_

**Mark all sacraments received, give the year of the sacrament if you don't know the date. Please complete Church and City information.**

<b>Baptism ( ) Convert ( )</b>	<b>First Confession ( )</b>	<b>Eucharist: ( )</b>	<b>Confirmation: ( )</b>
Date : _____	Date: _____	Date: _____	Date _____
Church: _____	Church: _____	Church: _____	Church _____
City: _____	City: _____	City: _____	City _____

### 6th child (Please use additional forms if needed)

Name \_\_\_\_\_ Sex: ( ) M ( ) F Date of Birth \_\_\_\_\_  
First, Middle, Last Preferred Name (xx/xx/xxxx)

Grade in School \_\_\_\_\_ Attending Religious Education ( ) Yes ( ) No Grade \_\_\_\_\_

School attending \_\_\_\_\_ Interested in more information on Religious Education ( ) Yes ( ) No

Religion: Catholic: ( ) Other: \_\_\_\_\_

**Mark all sacraments received, give the year of the sacrament if you don't know the date. Please complete Church and City information.**

<b>Baptism ( ) Convert ( )</b>	<b>First Confession ( )</b>	<b>Eucharist: ( )</b>	<b>Confirmation: ( )</b>
Date: _____	Date: _____	Date: _____	Date _____
Church: _____	Church: _____	Church: _____	Church _____
City: _____	City: _____	City: _____	City _____