



# ST. VINCENT DE PAUL

CATHOLIC PARISH & SCHOOL

Office Use Only

Envelope No. \_\_\_\_\_

Date Registered \_\_\_\_\_

Date Deleted \_\_\_\_\_

Date Reinstated \_\_\_\_\_

Family Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Your Name: \_\_\_\_\_

Prefix: \_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: M / F

Religion: \_\_\_\_\_ Occupation: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Have you ever been baptized? Y / N

If yes, please list the approximate date, church, and city/state of baptism.

\_\_\_\_\_

Have you received First Communion in the Catholic Church? Y / N

Have you received Confirmation in the Catholic Church? Y / N

Marital Status (circle one): single married divorced  
widowed divorced & remarried

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

Marriage Type: Catholic / Christian / Civil

Spouse's Name: \_\_\_\_\_

Prefix: \_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: M / F

Religion: \_\_\_\_\_ Occupation: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Have they ever been baptized? Y / N

If yes, please list the approximate date, church, and city/state of baptism.

\_\_\_\_\_

Have they received First Communion in the Catholic Church? Y / N

Have they received Confirmation in the Catholic Church? Y / N

Child #1 Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: M / F Grade: \_\_\_\_

Has this child ever been baptized? Y / N

If yes, please list the date, church, and city/state of baptism. \_\_\_\_\_

\_\_\_\_\_

Has this child received First Communion in the Catholic Church? Y / N

Has this child received Confirmation in the Catholic Church? Y / N

Child #2 Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: M / F Grade: \_\_\_\_

Has this child ever been baptized? Y / N

If yes, please list the date, church, and city/state of baptism. \_\_\_\_\_

\_\_\_\_\_

Has this child received First Communion in the Catholic Church? Y / N

Has this child received Confirmation in the Catholic Church? Y / N

Child #3 Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: M / F Grade: \_\_\_\_

Has this child ever been baptized? Y / N

If yes, please list the date, church, and city/state of baptism. \_\_\_\_\_

\_\_\_\_\_

Has this child received First Communion in the Catholic Church? Y / N

Has this child received Confirmation in the Catholic Church? Y / N

If you have more children living with you, you can add their information to the back of this sheet.

# Get Involved!

Circle any groups or ministries that you would like to learn more about.

## COMMUNITY

Family Sunday  
Knights of Columbus  
THRIVE Youth Group  
Bible in a Year  
SVdP Young Adults

## SERVICE

**Liturgical Ministry**  
Lector / Usher /  
EMHC / Sacristan /  
Altar Server  
  
**Music Ministry**  
Musician / Choir / Bell  
Choir  
  
Sandwiches for the Poor  
SVdP Society

## MISSION

SENT Neighborhood  
Evangelization Team  
  
Respect Life Team  
  
Prayer Warriors  
  
THRIVE Leaders  
  
Marriage Mentoring

Other: \_\_\_\_\_  
\_\_\_\_\_

(list any talent, skill, or service that you would like to share with our parish!)

Child #4 Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Sex: M / F Grade: \_\_\_\_  
Has this child ever been baptized? Y / N  
If yes, please list the date, church, and city/state of baptism. \_\_\_\_\_  
\_\_\_\_\_

Has this child received First Communion in the Catholic Church? Y / N  
Has this child received Confirmation in the Catholic Church? Y / N

Child #5 Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Sex: M / F Grade: \_\_\_\_  
Has this child ever been baptized? Y / N  
If yes, please list the date, church, and city/state of baptism. \_\_\_\_\_  
\_\_\_\_\_

Has this child received First Communion in the Catholic Church? Y / N  
Has this child received Confirmation in the Catholic Church? Y / N

Child #6 Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Sex: M / F Grade: \_\_\_\_  
Has this child ever been baptized? Y / N  
If yes, please list the date, church, and city/state of baptism. \_\_\_\_\_  
\_\_\_\_\_

Has this child received First Communion in the Catholic Church? Y / N  
Has this child received Confirmation in the Catholic Church? Y / N

Child #7 Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Sex: M / F Grade: \_\_\_\_  
Has this child ever been baptized? Y / N  
If yes, please list the date, church, and city/state of baptism. \_\_\_\_\_  
\_\_\_\_\_

Has this child received First Communion in the Catholic Church? Y / N  
Has this child received Confirmation in the Catholic Church? Y / N