

REGISTRATION AND CENSUS

SAINT AMBROSE PARISH

3107 63rd Avenue - Cheverly, MD 20785

ambroserectory@gmail.com • (301) 773-9300

- New Registration
- Update/Correction

Please write clearly and legibly, and manage your space wisely!

Date form completed

MM / DD / YY

Mailing Address:

Title	First Name	Initial	Last Name	Jr/St/etc.
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Street Address	Apt. #
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- Do not publish phone numbers
- Do not publish email

City	State	ZIP Code
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Primary Phone	Secondary Phone	E-mail
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For Office Use Only

Street address if different from mailing address

Language spoken at home if other than English

Do you have any special needs? e.g., large print materials; audio loop; sign language; transportation to church; information about special religious education for children with special needs?

INSTRUCTIONS: Please fill out a separate form for each family or unrelated person living in your household. Include students, military personnel or others living away from home temporarily.

	Name	Sex M/F	Date of Birth MM/DD/YYYY	Race or Origin* <i>Optional</i>	Marital Status**	Is marriage recognized by the Catholic Church? Yes/No	Baptized Yes/No	Confirmed Yes/No	Catholic (if other, please specify) Yes/No	Occupation/ Name of school (if full-time student)
Self:										
Spouse:										
Child:										
Child:										
Child:										
Child:										
Child:										
Child:										
Other related:										
Other related:										
Other related:										

*** Key for Race or Origin:**
 W—White, not of Hispanic origin B—Black or African American H—Hispanic or Latino
 A—Asian Other(s)—Please Specify

Information voluntarily provided about race and/or origin is used to plan for and better serve the pastoral needs of the Archdiocese

**** Key for Marital Status:**
 N—Never married
 M—Now married
 D—Divorced
 S—Separated
 W—Widowed

Please send the completed form by regular mail, by email or drop it off to the parish office